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ABSTRACT

The guide is designed to consolidate into a systematic order the most common references and resources in the field of early childhood special education and to offer practical "how to" handouts which may aid adults working with young handicapped children. Ten sections contain information in the following areas (sample contents listed in parentheses): referral procedures (referral process flow chart for Iowa, placement procedures, and sample referral and notification forms); legal guidelines (a review of federal and state legislation, key points of P.L. 94-142--the Education for All Handicapped Children Act, and a report on the individualized education program); evaluation materials (checklists for assessing teacher and instructional program effectiveness, a scoring key for criterion referenced checklists, and a list of common instruments/tools used with preschool handicapped children); parent involvement (guidelines for working with parents, brief review of parent activities, and a reading guide on infants/children/families); behavior management (suggestions for handling behavior problems); curriculum areas (guidelines, forms, and activities for developing communication, motor, cognitive, self care, and social skills); resources/references (brief descriptions of selected Iowa organizations, a bibliography of materials, and a reading guide to references in the health/medical, and the theory/overview areas); attitudes (handouts for developing positive attitudes); and miscellaneous (requirements of teachers of preschool handicapped). (SEH)

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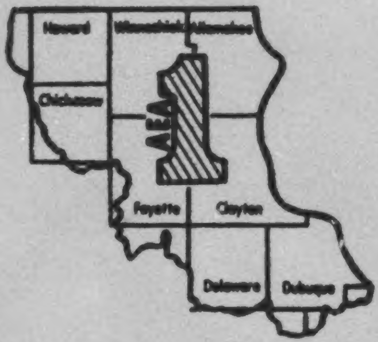
EARLY CHILDHOOD--HANDICAPPED
RESOURCE GUIDE



DIVISION OF SPECIAL EDUCATION
KEYSTONE
AREA EDUCATION AGENCY

EUGENE C. PRATT, DIRECTOR

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EC 124 251

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FOREWORD

Preschool handicapped children are children with very special needs. As special educators, and parents, our ability to help such children learn depends significantly upon developing our technical and practical knowledge which will assist us in making the most of the preschool handicapped child's maximum potential.

The development of this Resource Guide for Early Childhood Handicapped, will offer broad, candid perspectives related to changes which are taking place in educational programs for preschool handicapped children. Readers will find practical suggestions as well as interesting strategies that should expand their perceptions and knowledge about handicapped infants, children, and their families.

This is indeed the era of the young child. It is significant to note that this Resource Guide is released during the International Year of the Child. Information contained in this Resource Guide is designed to help improve educational and parenting practices for the preschool handicapped child. From these pages, we in the Keystone Division of Special Education, hope the reader will come to have a better understanding of present and future instructional resources that will impact directly upon the learning endeavors of the preschool handicapped.

Eugene C. Pratt, Director
Keystone Division of Special Education

BACKGROUND

Early in 1975 the Keystone Area Education Agency received a small federal grant to conduct a search for preschool handicapped children. This search, called Childfind, was very successful. As a result of this and subsequent Childfind successes, our preschool program has developed into a comprehensive approach to working with preschool handicapped children.

The success of this program, called Project CHILD, is based upon the total commitment of the Keystone Board, the Administration, and the Staff - all dedicated to helping these children.

Project CHILD now includes teachers, speech clinicians, physical and occupational therapists, psychologists, social workers, audiologists, school nurse, and preschool consultants. This Resource Guide is a new addition to this total program.

Raymond C. DeNeve
Assistant Director of Special
Education - Support Services

INTRODUCTION

Early childhood-special education has recently emerged to the forefront in the education field. In the past twenty years there has literally been an explosion of research, legislation, and knowledge on young handicapped children and their families. This has made these youngsters and their families a visible part of our education system. In order to serve this population there has been an avalanche of materials, books, and resources developed. As a result, parents and professionals have had a real opportunity to grow and learn, along with the field of early childhood-special education. Since there is such a wealth of information waiting to be explored and utilized by the preschool handicapped specialists, it may become difficult to remain abreast of the most current material. Therefore, the need to provide practical accessibility to updated ideas for professionals and parents is clear.

The Early Childhood-Handicapped Resource Guide was designed as an organizational tool for professionals and parents. It attempts to consolidate into a systematic order the most common references and resources in the field. It also offers some practical "how to" hand-outs which may aid adults working with young handicapped children. In order to gain the most from the guide the following ideas are recommended:

a) Feel free to add or delete information from this guide as needed. You may wish to ask various professionals for hand-outs or resources that relate directly to the specific needs of the children you work with each day. This will facilitate an interdisciplinary approach and aid in coordinating services for the children.

b) One of the greatest needs in the early education of the handicapped is community education. Share the ideas from the resource guide with various human service agencies and interested people.

c) If you would like to share some ideas or resources with other resource guide users, please send the hand-outs to:

Early Childhood-Handicapped Committee
Keystone Area Education Agency
Elkader, Iowa 52043
Attn: Bill Landers

This committee will evaluate the ideas to determine where they best fit into the resource guide. Please credit all of your ideas with their proper reference. Also, include your name, as all contributions will be acknowledged. Updating the guide will occur in November and April of each school year.

d) This resource guide is intended to evolve, grow, and change as you do, and as new information is available.

There is no greater cause than helping families and their young handicapped children. It is the intention of Keystone Division of Special Education that this resource guide will assist you in this task. At the same time it is hoped that you will HAVE FUN, as you grow and serve these people.

Bill Landers, Preschool Consultant
Keystone Division of Special Education

Thank you is extended to Gerrie Burger for typing and to JoAnn Butikofer for proofreading this resource guide.

*HOW DO YOU LIKE THIS RESOURCE GUIDE?

After you have used this resource guide for 30 days, please take a minute to fill out the evaluation form below. We sincerely want all of your ideas regarding this resource guide. Thank You!

1. HOW WOULD YOU RATE THE FOLLOWING:

   A) Quality of the Resource Guide

   _____ Excellent _____ Good _____ Fair _____ Poor

   B) Organization of the Guide

   _____ Excellent _____ Good _____ Fair _____ Poor

   C) Usefulness of the Information

   _____ Excellent _____ Good _____ Fair _____ Poor

2. WHAT IS YOUR OVERALL EVALUATION OF THE RESOURCE GUIDE?

   _____ Excellent _____ Good _____ Fair _____ Poor

3. COMMENTS/IDEAS: (All feedback is welcomed)

* Please send this completed form to:

Preschool Services--Resource Guide Evaluation
Keystone Area Education Agency
Elkader, Iowa 52043
Attention: Bill Landers

REFERRAL PROCEDURES

LEA REFERRAL PROCEDURES

When there is reason to believe a child is in need of special education services, the following referral procedures, which are in compliance with Federal and State regulations (Rule 12.17/18), shall be followed:

A. Initiation of Referrals

A referral may be made whenever there appears to be a need for special services. Referrals for students exhibiting needs for special service may be initiated by any professional or agency who works with the student, by the student's parent, or by the student himself. While anyone may initiate a referral, the building Principal of the school which the child attends should be advised by the referring party. It should be noted that referrals are submitted for evaluation, assessment, or consultation purposes only. Referrals must be submitted on the Keystone AEA Referral Form. Verbal referrals will not be honored. Forms are available in each building Principal's office or AEA Regional Field Offices.

B. Outside Referrals

Referrals other than those initiated by the LEA must be signed by the referring party. A copy of the referral will be forwarded upon receipt to the building Principal in whose district the child resides by the AEA secretary responsible for logging that district's referrals.

C. In house Staffing

The LEA Principal is responsible, prior to the initiation of a referral, for insuring that all in-house adjustments have been exhausted. These should include parent conferences, classroom observations, curricular adjustments, and/or consultations with Keystone AEA Special Education field personnel. This filtering process should assure that all referrals are appropriate prior to the initiation of special education assessments.

D. Completion of the Referral for Evaluation Form

SPECIAL NOTE:

The Parent Permission For Assessment, (R1), The Special Education Referral Form, (R2), and the Overview of Due Process Procedures have been combined into one form, now titled REFERRAL FOR EVALUATION.

This form is produced on NCR paper and will be provided to LEA's by the Keystone Division of Special Education. These Forms will be made available from your Regional Field Office.

Form R1 is the referral form to be used for obtaining special education services.

1) All sections of the Referral Form must be properly completed.
2) Section III requires parental signatures.

Signatures may be obtained by -

a) forwarding referral to parents for signature,

b) obtaining signatures at a parent conference, or

c) any other method determined by the LEA to be appropriate.

3) Copies of the Referral are to be distributed in the following manner:

- -- White Copy - forwarded to AEA
- -- Yellow Copy - retained by LEA (placed in child's cumulative folder)
- -- Pink Copy - retained by parent

4) When the Referral form has been completed, it is to be forwarded to the Regional Special Education Field Office assigned to serve your school district addressed as follows:

REFERRAL SERVICE
Keystone Division of Special Education
(Appropriate Regional Office assigned to your LEA)
See Referral flow chart page 5

5) No child can receive special education services unless the Referral for Evaluation form (R1) has been properly completed on the form provided. Incomplete referral forms will be returned to the building Principal for proper completion.

F. Servicing a Referral

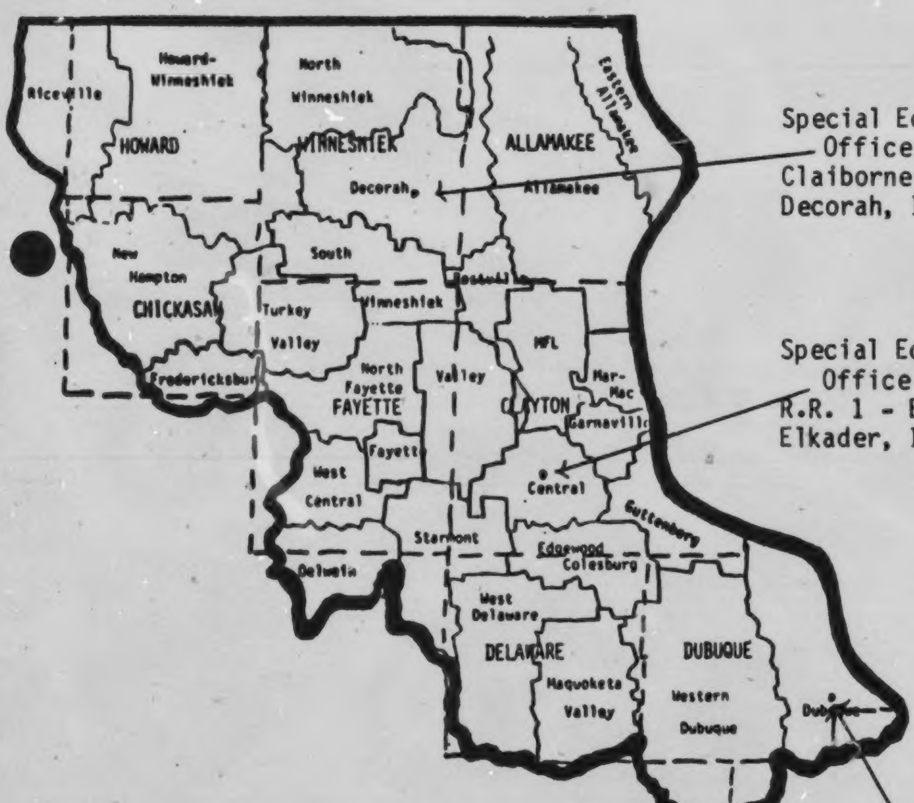
Generally speaking, the following procedure will be utilized when servicing a referral. However, there may be certain circumstances related to a child's problem which may require a modification of the below listed procedure. The basic procedures are as follows:

1) The referral is received in the appropriate AEA Field Office.
2) The referral is then assigned to a service team or staff member who will contact the school.
3) The staff member will assess what work has been completed or what work needs to be accomplished.
4) Appropriate assessments or conferences are completed.
5) When required, a diagnostic/educational team staffing is conducted.

KEYSTONE DIVISION OF SPECIAL EDUCATION

Referral Process Flow Chart

Child Considered
↓
In-house Staffing
(LEA personnel)
↓
Referral Completed And
Signed By Parent or guardian
↓
Referral Forwarded to Regional AEA Field Office


Riceville
Howard-Winneshiek
HOWARD
North Winneshiek
WINNESHIEK
Decorah
ALLAMAKEE
Eastern Allamakee
Allamakee
New Hampton
CHICKASAW
South Winneshiek
Turkey Valley
Postville
MFL
North Fayette
FAYETTE
Valley
CLAYTON
Mar-Mac
Garnavillo
Fredericksburg
West Central
Fayette
Central
Guttenberg
Starmont
Edgewood Colesburg
Oelwein
West Delaware
DELAWARE
Maquoketa Valley
DUBUQUE
Western Dubuque
Dubuque

Special Education Regional
Office
Claiborne Drive
Decorah, Iowa 52101

Special Education Regional
Office
R.R. 1 - Box 330A
Elkader, Iowa 52043

Special Education Regional
Office
Conlin Building - 1st floor
1473 Central
Dubuque, Iowa

KEYSTONE AREA EDUCATION AGENCY
DIVISION OF SPECIAL EDUCATION
ELKADER, IOWA 52043

White - AEA Copy
Yellow - LEA Copy
Pink - Parent Copy

REFERRAL FOR EVALUATION

SECTION I: Identifying Information

1. Name ____________ Birthdate ________ Sex ______
2. Parent ____________ Mailing Address ____________ Phone ______
3. School District ____________ Attendance Center ____________
4. Grade ________ Teacher ____________
5. In-house staffing date ____________

SECTION II: Referral Information

1. Briefly describe your major concern regarding the above child. (Attach narrative if space is not adequate.)

SECTION III: Parent Permission for Assessment

The undersigned parent(s) or legal guardian(s) of the above listed child approve of the requested special education services which may include individual testing and consultation or direct therapy services which will enable the school district to provide the most appropriate educational experience for my child. The specific evaluation being requested is: ____________

PARENTS NOTE: Your due process rights regarding the above evaluations are located on the reverse side of this form. Review all items prior to signing this approval section.

Signed ____________ and/or ____________
Father/Legal Guardian   Mother/Legal Guardian

Date ____________ 19____

SECTION IV: Local Education Agency Approval

1. Referred by ____________
2. Principal or Designee Signature ____________
3. Date forwarded to AEA ____________

NOTE: Forward to:
REFERRAL SERVICE
Keystone Division of Special Education
(Appropriate Regional Office Assigned to your LEA)

FOR AEA USE:
Date Received ____________ Date Logged ____________
Routed to ____________
Primary Agent Assigned ____________

KEYSTONE AREA EDUCATION AGENCY DIVISION OF SPECIAL EDUCATION

OVERVIEW OF DUE PROCESS PROCEDURES

As a parent you should be informed that handicapped children and their parents have certain rights which are protected by two federal laws. They are Public Law 94-142 and Section 504 of the Rehabilitation Act of 1973. The rights guaranteed under these laws are as follows:

1. Least Restrictive Environment: Handicapped children have a right to a free and appropriate education and shall be educated with children who are not handicapped or in close proximity to such children to the maximum extent appropriate.

2. Records: Parents have a right to: (a) inspect and review records, (b) a listing of types and location of records, (c) request an explanation of or amendment to the records and (d) a hearing regarding all records affecting placement of a handicapped child.

3. Independent Evaluations: Parents have a right to: (a) have an independent, low or no cost educational evaluation, (b) request a hearing officer to order an independent evaluation at public expense, (c) have the independent evaluation considered in any decision affecting services to the child and (d) know the criteria for placement of the child into special education services.

4. Notice: Parents have a right to written notice, in the parents native language, and in understandable terms before the school district initiates identification, evaluation or placement changes; or refuses to change placement of a handicapped child. Such notice must describe the proposed action, tell why the action is proposed, describe options considered and rejected as well as describe the evaluation procedures, test, record and report used as a basis for proposed action.

5. Consent: Parents have a right to consent before an evaluation is conducted and before initial placement in special education as well as a right to revoke consent at any time. The agency, in behalf of the child, has a right to conduct a hearing to determine if the child should be initially evaluated or initially placed in absence of parental consent. Parents have a right to be heard at such a hearing.

6. Hearing: Parents have a right to request an impartial due process hearing to question the school district's identification, evaluation, placement of a child or provision of a free appropriate public evaluation. Additionally, parents have a right to information free or low cost legal or related services, legal counsel, a right to invite individuals or the public, the right to present evidence, cross examination and the right to have the child remain in the present educational placement during the due process proceedings.

   NOTE: All requests for Appeal Hearings should be addressed to:
   Dr. Robert Benton, (Iowa) State Hearing Officer, Grimes
   State Office Building, Des Moines, Iowa - 50319.

7. Surrogate Parent: The child has a right to a surrogate parent when no one can be identified as acting in the place of a parent.

8. Evaluation Procedures: Parents and children have the right to have a multi-disciplinary individual evaluation of the child's educational needs with evaluative devices which do not discriminate on the basis of language, culture, impaired sensory, manual or speaking skills. Additionally, the child and parent have a right to guarantee that placement will be based on more than one criterion with consideration to all areas related to the disabilities of the child, as well as right to re-evaluation every three years or as otherwise deemed necessary.

9. Confidentiality of Information: Parents have a right to withhold consent to release records, be informed before records are destroyed as well as be informed as to whom the information has been released.

Please be advised that additional information is available to you regarding the due process procedures and your rights as a parent. For further information, contact your school superintendent or the Keystone Area Education Agency, Division of Special Education, R.R. #1 Box 330A, Elkader, Iowa 52043. 1-800-632-5918.

TEAM LEADER'S RESPONSIBILITY

The Team will complete the following:

1. Is responsible for appointing a substitute should he/she not be available on a Friday morning.
2. Collects referrals from the secretary.
3. Assembles the Team.
4. Leads the group in discussion of the referral.
5. Insures that a Primary Agent is assigned to each referral.
6. Completes a log of the referral (see model).
7. Leads the discussion of topics of interest to the Team (other than referrals).

PLACEMENT PROCEDURES

I. Placement Defined

1. Placement means enrollment in any special education instructional or related service program.

II. Placement Procedures

1. Prior to the *initial* placement in any special education instructional or related service program, a signed parental approval form must be obtained, and the designated copy filed as noted below:

    A. *INSTRUCTIONAL PLACEMENT:* The designated copy of (SE-PL-1) the parental approval form must be attached to the submitted D & E form.

    The SE-PL-1 form is to be used in all of the below listed placements:

    1. Regular Class with Supplemental Assistance
    2. Itinerant Instructional Programs
    3. Resource Room Programs
    4. Special Classes with Integration
    5. Self-Contained Classes (2.0 and 4.0)
    6. Project CHILD Programs

B. *Related Service Program Placement:* The designated copy of (SE-PL-2) the parental approval form must be attached to the submitted D & E report form.

The SE-PL-2 form is to be used in all of the below listed placements:

1. Any Therapy Program of Service
2. Any Counseling Program of Service

SE-PL-1

KEYSTONE AREA EDUCATION AGENCY — DIVISION OF SPECIAL EDUCATION

R.R. 1 Box 330A
Elkader, Iowa 52043

PARENTAL NOTIFICATION AND APPROVAL
FOR
SPECIAL EDUCATION PLACEMENT IN INSTRUCTIONAL PROGRAM

Upon the acknowledgement of the following four (4) areas of discussion during this conference, I approve of placement for my child,________________________ in ___________________________

____

instructional program.

1. The results and recommendations of the Diagnostic-Educational Team have been shared and discussed with me. Said recommendations and results are to be placed on file in my child's folder.
2. The proposed instructional program has been reviewed in detail, and the instructional program has been outlined regarding the goals and objectives recommended in meeting the educational needs of my child.
3. I have been informed of my due process rights regarding the recommended educational program change for my child.
4. I have been informed that this consent may be revoked by me at any time.

__________________________ __________________________
Signature of Parent/Guardian Date

1-AEA
2-LEA
3-Parent

SE-PL-2

KEYSTONE AREA EDUCATION AGENCY DIVISION OF SPECIAL EDUCATION

R.R. 1 BOX 330A
ELKADER, IOWA 52043

PARENTAL NOTIFICATION AND APPROVAL

FOR

SPECIAL EDUCATION PLACEMENT IN RELATED SERVICES PROGRAM

Your child ____________________________ has been evaluated by the support personnel of the Keystone Area Education Agency. As a result of this evaluation, it is recommended that ____________________ services be offered.

This service is part of your school's educational program provided at no cost to you.

If this meets with your approval, please sign below where indicated and send to the person noted below. If not, please notify us as soon as possible. We would welcome the opportunity to share the results of our findings with you.

Please contact me if you have any questions regarding your child's program. Thank you for your cooperation.

Sincerely,

____
(Parent's Signature)

____
Date

Return to:

1-AEA
2-LEA
3-Parent

EXIT PROCEDURES

I. EXIT DEFINED:

Exit from a special education instructional or related service program means the termination of a child requiring special education from the above listed service programs.

II. EXIT PROCEDURE

A child requiring special education may be recommended for termination from a special education instructional or related services program by LEA, AEA, or parental requests. Such requests may be initiated at any time during the school year.

Keystone procedures require that all program terminations must include the following sequential steps:

1. Parent notification or conference designed to inform of intent to terminate from special education service program. (Written parental consent is not required.)
2. The same procedure as outlined in the Three Year Evaluation (Sections I (sub) 2, 3, 4, 5, 6) must be implemented prior to any child being terminated from a special education instructional or related service program.
3. If termination is deemed appropriate in Step #2 of this procedure, then the Annual Review Section of the IEP must be completed indicating a specific recommendation for termination.

KEYSTONE AREA EDUCATION AGENCY
DIVISION OF SPECIAL EDUCATION
R.R. 1 Box 330A
Elkader, Iowa 52043

Service Procedures on Three-Year Reevaluations

Positional Statement

Subpart E, Sections 121a.530 through 121.534 of Public Law 94-142 mandates that state and local educational agencies insure that reevaluations of children identified and served as handicapped will be conducted every three years or more frequently if conditions warrant or if the child's parent or teacher requests such an evaluation.

Iowa's response to the federal mandate has been recorded in the State Amended Annual Program Plan (Fiscal Year 1978) authored by the Iowa State Department of Public Instruction. Guidelines for the development of individual Area Education Agency responses of compliance to the Three-Year Reevaluation Mandate are located in Iowa Rules of Special Education Services and Program Management (Division V), which establishes policies and procedures relative to the evaluation and placement of handicapped children.

The Keystone AEA 1 Division of Special Education, recognizing its role and responsibility in providing a free and appropriate public evaluation for Area 1 handicapped children, has developed the following service procedures on Three-Year Reevaluations. These procedures will go into effect beginning January 3, 1979. Three-year reevaluations initiated or completed prior to January 3, 1979 will be considered valid and not subject to the attached procedures.

Section I: Definition of Terms and Service Descriptors.

1. Target Population: Three-year reevaluations should be directed toward an identified handicapped student placed in a special education instructional program and/or receiving special education services within the service boundaries of Keystone AEA 1. Children who are handicapped refers to those children requiring special education as defined in section 281.8 of the Iowa Code. Special education programs and services are all special education activities provided for children requiring special education as defined in Division I, Section 12.3(6), of the Rules of Special Education. Exception: Children who have a speech impairment as their primary handicap may not need a complete battery of assessments. However, a qualified speech-language pathologist should evaluate each speech impaired child and make referrals for additional assessments that appear warranted.

2. Due Process Procedures: The entire evaluation process and individual procedures involved in three-year reevaluations are subject to due process procedural safeguards which meet requirements outlined in 94-142, Sections 121a.500-121a.514. Included in these requirements are parental notification, opportunity for challenge, and opportunity for an independent evaluation at the request of the parent(s) or guardian(s) of the child. Parental notification shall be the responsibility of appropriate LEA administrative personnel.

3. Multidisciplinary Team: Reevaluations are cooperative responsibilities of AEA and LEA personnel. Assessments are made by a diagnostic-educational evaluation team of trained personnel. The diagnostic-educational team shall include at least one LEA teacher and one AEA discipline specialist in the area of suspected disability. The minimum multidisciplinary team shall include the regular classroom teacher or special education teacher, and disability consultant. Other appropriate AEA or LEA personnel may constitute part of the multidisciplinary team as deemed necessary.

4. Multifactored-multisourced Assessments: An acceptable assessment battery will involve written statements of functioning by qualified members of the educational-diagnostic team in the areas of general health (school nurse), general intelligence (school psychologist), academic performance (classroom and/or special education teachers), communicative status (teachers-psychologist-disability consultants) and social/emotional status (social workers and/or psychologists). Members of the multidisciplinary team not in attendance at the staffing will submit their written statements of the child's functioning to the primary agent prior to the scheduled staffing date. Children placed in special education instructional programs for a specific primary disability; i.e. hearing, vision, etc. will require an assessment by a consultant or specialist with expertise in the suspected disability area. Children receiving a specific direct support service; i.e. counseling, physical therapy, etc. need only be evaluated by the professional team member providing the direct service. Evaluation materials and procedures must be selected and

administered to any child so as not to be racially or culturally discriminatory.

5. Staffings: Three-year reevaluations should follow established AEA D & E processes. Procedural steps and details of D & E processes are available in the Keystone Division of Special Ecuation Guidelines and Procedure Manual. It is the responsibility of LEA administrative personnel to notify parents of the scheduled staffing, encourage parental attendance, and to inform parents of the staffing recommendations. The minimum staffing team in attendance should include an LEA representative, AEA representative, teacher, parents, and any other appropriate individuals requested by the parent, school, or AEA.

6. Individual Educational Programs (IEP's): Three-year reevaluations as in the case of all special education evaluations, require the development and writing of IEP's. The IEP shoud review the efficacy of the child's existing program, validate the appropriateness of the child's placement, suggest modifications if relevant, and update instructional/direct service goals and objectives. Children receiving a direct support service but not placed in an instructional program, will require a direct service IEP.

7. Reports and Record Keeping: All evaluation data and information obtained on a three-year reevaluation are subject to established rules of confidentiality and AEA procedures for record keeping.

Section II: Procedural Recommendations.

Step I: Identification of students needing reevaluations will be the responsibility of assigned disability consultants and/or itinerant teachers for those children placed in instructional programs. Students receiving direct services shall be identified by those AEA support personnel providing the direct services.

Step II: By the first Friday in October, completed lists of students identified as needing three-year evaluations will be submitted to Discipline Supervisors and Assistant Directors. Forms will be provided (see attached) and coded by year of last evaluation for use as identification lists. Copies should be given to LEA officials.

Step III: Upon receipt of all identification lists, LEA officials will notify parents of the pending re-evaluations.

Step IV: Upon receipt of all identification lists, AEA discipline Supervisors and Assistant Directors will deliver the lists to appointed service team leaders in the field office serving the child's school district. It will be the responsibility of the field office team to appoint a primary agent and to develop, with LEA personnel, an appropriate educational-diagnostic team.

Step V: Students on the identified lists will be serviced according to the following priorities:

First Priority: most extreme violations with time as the factor; i.e. students whose evaluations are outdated 5 years or more would be reevaluated before those whose last evaluation was 4 years or less, etc.

Second Priority: students who have identical time factors as a first priority will then be served according to program restrictiveness; i.e. students in the more restrictive programs will be evaluated first.

Third Priority: students receiving direct services.

Fourth Priority: students within the final year of their formal education experience.

Step VI: Upon completion of the lists and iplementation of the reevaluation process, LEA and AEA officials will establish realistic service objectives.

Step VII: Upon completion of the reevaluation, staffing, and IEP formulation, the child's status for reevaluation needs will be reviewed at each annual staffing as an Agency procedure to insure that all children identified and served within the service boundaries of Keystone AEA 1 will have reevaluations conducted every three years or more frequently.

Section III: Completion of the Three-year Reevaluation List.

Students will be grouped on the list(s) by the year of their last evaluation. This could result in the use of one to four lists per instructional program or of those receiving direct support services. Please check in the appropriate space at the top of each list the group's year of last evaluation.

Identify the student's school district, building center, and special education teacher. If the student is receiving a direct support service only, leave blank the space for teacher's name.

Identify in the space marked recorder, the disability consultant, itinerant teacher, or support person who has completed the list.

For students listed from an instructional program, circle the Present Program Model type.

Circle the appropriate program level. Consider students in K through 8 as being elementary.

Identify the disability by circling the correct symbol. Students whose primary disability is different than the model and have been placed on special waiver in a program can be asterisked as their name is listed and their disability symbol noted in brackets behind their name.

List the children by last name, first name, and then middle initial. Note their date of birth, the month and year of their last evaluation, and the full name of their parent or guardian.

Date the completion of the list(s).

IDENTIFYING CHILDREN WITH SPECIAL NEEDS

This is a list of behaviors which can help adults recognize children with special needs. If a child you know has any one of these characteristics ask yourself, "Is his behavior making things so hard for him that he is not progressing?" or "Does the behavior interfere with the child's ability to explore, experiment or engage in a wide range of learning experiences that will promote sound development?" (Allen, 1972). You should consider referring the child to your local school district or Area Education Agency. For additional evaluation, assessment or consultation.

1. SHORT ATTENTION SPAN; UNABLE TO CONCENTRATE:
   -not able to pay attention long enough to finish an activity.

2. RESTLESS OR HYPERACTIVE:
   -moves around constantly, fidgets; doesn't seem to move with a purpose in mind; picks on other children.

3. DOES NOT COMPLETE TASKS; CARELESS, UNORGANIZED APPROACH TO ACTIVITIES:
   -does not finish what is started; does not seem to know how to plan to get work done.

4. LISTENING DIFFICULTIES; DOES NOT SEEM TO UNDERSTAND:
   -has trouble following directions; turns away while others are talking; does not seem to be interested.

5. AVOIDS PARTICIPATION WITH OTHER CHILDREN OR ONLY KNOWS HOW TO PLAY BY HURTING OTHERS:
   -stays away from other children; always plays alone; leaves a group of children when an activity is going on; bites, hits or bullies.

6. AVOIDS ADULTS:
   -stays away from adults; does not like to come to adults for attention.

7. REPETITIVE BEHAVIOR:
   -does some unusual movement or repeats words over and over, cannot stop activity himself.

8. RITUALISTIC OR UNUSUAL BEHAVIOR:
   -has a fixed way of doing certain activities in ways not usually seen in other children.

9. RESISTANT TO DISCIPLINE OR DIRECTION (impertinent, defiant, resentful, destructive or negative):
   -does not accept directions or training; disagreeable, hard to manage; destroys materials or toys deliberately; temper tantrums.

10. UNUSUAL LANGUAGE CONTENT (bizarre, strange, fearful, jargon, fantasy):
    -very odd or different talk with others or in stories.

11. SPEECH PROBLEMS:
    -rate: speech that is unusually fast or slow
    -articulation: difficulty making clear speech sounds
    -stuttering: difficulty with flow of speech; repeating sounds, words or phrases; blocking words or sounds
    -voice: unusually loud, soft, high or low; scratchy
    -no speech: chooses not to talk or does not know how to talk so that others can understand.

12. PHYSICAL COMPLAINTS:
    -talks of being sick or hurt; seems tired or without energy.

13. ECHOES OTHER'S SPEECH:
    -repeats another person's words without intending for the words to mean anything.

14. LACK OF SELF-HELP SKILLS:
    -unable to feed self, unable to dress self, unable to conduct toilet activities unaided, or to carry out health practices such as washing hands, brushing teeth, etc.

15. SELF-AGGRESSIVE OR SELF-DEROGATORY:
    -does things to hurt self
    -says negative things about self.

16. TEMPERAMENTAL, OVERLY SENSITIVE, SAD, IRRITABLE:
    -moody, easily depressed, unhappy, shows extreme emotions and feelings.

Developed by: Rutland Center, Athens, Georgia

Ref.

PARENT EARLY WARNING SIGNS

The following list contains behaviors that may indicate a child has special needs. If you suspect for any reason your child may have special needs, please contact your local school principal or Area Education Agency to find out the procedures for getting help EARLY.

SEEING

If Your Child . . .

Is often unable to locate and pick up small objects which have been dropped.

Frequently rubs eyes or complains that eyes hurt.

Has reddened, watering or encrusted eyelids.

Holds head in a strained or awkward position (tilts head to either side--thrusts head forward or backward) when trying to look at a particular person or object.

Sometimes or always crosses one or both eyes.

THINKING

If Your Child . . .

Does not react to his/her own name when called by age 1.

Is unable to identify hair, eyes, ears, nose and mouth by pointing to them by age 2.

Does not understand simple stories told or read by age 3.

Does not give reasonable answers to such questions as "What do you do when you are sleepy!" or "What do you do when you are hungry?" by age 4.

Does not seem to understand the meanings of the words "today," "tomorrow," "yesterday" by age 5.

MOVING

If Your Child . . .

Is unable to sit up without support by age 1.

Cannot walk without help by age 2.

Does not walk up and down steps by age 3.

Is unable to balance on one foot for a short time by age 4.

Cannot throw a ball overhand and catch a large ball bounced to him/her by age 5.

TALKING

If Your Child . . .

Cannot say "Mama" and "Dada" by age 1.

Cannot say the names of a few toys and people by age 2.

Cannot repeat common rhymes or T.V. jingles by age 3.

Is not talking in short sentences by age 4.

Is not understood by people outside the family by age 5.

Ref.

PLAYING

If Your Child . . .

Does not play games such as peek-a-boo, patty cake, waving bye-bye by age 1.

Does not imitate parents doing routine household chores by age 2.

Does not enjoy playing alone with toys, pots and pans, sand, etc. by age 3.

Does not play group games such as hide-and-seek, tag-ball, etc. with other children by age 4.

Does not share and take turns by age 5.

HEARING

If Your Child . . .

Does not turn to face the source of strange sounds or voices by six months of age.

Has ear aches or running ears.

Talks in an unusually loud voice.

Does not respond when you call from another room.

Turns the same ear toward a sound he/she wishes to hear.

Taken From: Consortium of State Departments of Education in the Appalachian Region, P.O. Box 1925, Charleston, W. Va. 25325. The Consortium has pamphlets available on the above information.

SPECIAL EDUCATION FIELD OFFICES

*Keystone AEA Special Education
Elkader Field Office
R.R. 1, Box 330A
Elkader, Iowa 52043 319-245-1480

*Keystone AEA Special Education
Dubuque Field Office
Conlin Building
1473 Central Ave.
Dubuque, Iowa 52001 319-588-0538
South Diagnostic Center 319-588-0538

*Keystone AEA Special Education
Decorah Field Office
Claiborne Drive
Decorah, Iowa 52101 319-382-2870
North Diagnostic Center 319-382-2870

Keystone AEA Special Education
Manchester Field Office
220 Liberty
Manchester, Iowa 52057 319-927-2143

Keystone AEA Special Education
Farley Field Office
Western Dubuque Central Adm.
Farley, Iowa 52046 319-744-3309

Keystone AEA Special Education
West Union Field Office
210 1/2 North Vine Street
West Union, Iowa 52175 319-422-5678

Keystone AEA Special Education
Cresco Field Office
1010 Schroeder Drive
Cresco, Iowa 52136 319-547-4834

Keystone AEA Special Education
Oelwein Field Office
Wings Park Elementary School
Oelwein, Iowa 50662 319-283-4803

Keystone AEA Special Education
Waukon Field Office
201 Sixth Street N.W.
Waukon, Iowa 52172 319-568-4818

Keystone AEA Special Education
New Hampton Field Office
R.R. 1 - 1000 West Hamilton
New Hampton, Iowa 50659 515-394-2162
515-394-2163

* Regional Field Offices

REFERRAL INFORMATION: READING GUIDE

Allen, K.E. and others. Early Warning: Observation as a Tool for Recognizing Potential Handicaps in Young Children. Phi Lambda Theta, Bloomington, Indiana, (in Educational Horizons, 1972).

Child Find--Proceedings from a Conference Sponsored by the National Coordinating Office for Regional Resource Centers and National Association of State Directors of Special Education. Washington, D.C. March 26-27, 1975.

Garland, Corinne and Kiefer, Sharon E. Child Find--A Manual. Child Development Resources, Williamsburg, Virginia, 1977.

Mestes, Beverely M. Child Find Identification Kit. Division of Elementary and Secondary Education, Section for Special Education, Pierre, S.D.

Peterson, Pam and Clark, Bob. Search for Special Children--A Childfind Project of the Indiana Department of Public Instruction. Division of Special Education, Indianapolis, Indiana.

Price, Claire and others. The Observational Checklists for Referral. Southwest Educational Development Corporation, Austin, Texas, 1974.

Rural Services--Developmental Disabilities Technical Assistance System, Chapel Hill, N.C.: Frank Porter Graham Child Development Center, University of North Carolina, 1977.

Teacher's Observation for Identifying Children Who May Require Additional Services. Model Preschool Center for Handicapped Children, Child Development and Mental Retardation Center, University of Washington, Seattle, Washington, July, 1975.

ADDITIONAL SOURCES OF YOUR CHOICE:

LEGAL GUIDELINES

Federal Legislation for Preschool Handicapped

1965 Economic Opportunity Act

Head Start programs were created for culturally deprived preschool youngsters. A statement appeared in the Head Start manuals regarding handicapped children. It stated, "Head Start encourages the inclusion of mentally or physically handicapped preschool children in programs which serve non-handicapped" (p.5).

1968 P.L. 90-538 Handicapped Children's Early Education Assistance Act

Established experimental, model education programs that would be able to serve state and local educational agencies. These would be exemplary demonstration projects. There are about 200 such projects. Another part of this act (State Implementation Grant) encouraged and supported the implementation of comprehensive early childhood plans by states.

1972 Amendment P.L. 92-424 to the Economic Opportunity Act of 1965

This new amendment stated " . . . not less than ten per centum of the total number of enrollment opportunities in the Nation in the Head Start program shall be available for handicapped children (as defined in paragraph (1) of section 602 of the Elementary and Secondary Education Act of 1965, as amended) and that service shall be provided to meet their special needs" (DHEW, 1973, P.5.).

It also went one step further and defined handicapped as " . . . mentally retarded, hard of hearing, deaf, speech impaired, visually handicapped, seriously emotionally disturbed, crippled and other health impaired children who by reason thereof require special education and related services" (DHEW, 1973, p. 1).

This was later amended to say " . . . not less than ten per centum of the total number of enrollment opportunities in each state . . . "

1973 P.L. 93-112 Section 504 of the Rehabilitation Amendments

Basic civil rights provision. If a state offers service to a non-handicapped preschool child they must also offer the same service to a handicapped preschool child.

1974 Education Amendments, P.L. 93-380

Introduced new requirements for handicapped children, one of which was the requirement that each state should set a goal to serve the handicapped between 0-21 more of a philosophical requirement because no timelines were attached to it. Another part of P.L. 93-380 was the requirement that states should establish and maintain systematic efforts to find all handicapped children from 0-21. (Child Find). Children not in school were to be major emphasis of the Child Find efforts.

1975 P.L. 94-142 (SEE Hand-out Key Points of P.L. 94-142 this section of resource guide)

Section 619 of P.L. 94-142

The Incentive Grant program was added to P.L. 94-142 to enhance and stimulate the expansion of services to 3, 4 and 5 year old handicapped children. By doing this, the government was recognizing the importance and cost effectiveness of early intervention. The amount of money received by a state is determined by the number of 3, 4 and 5 year olds determined in the count of handicapped children who are receiving a free and appropriate public education. States apply for the Incentive Grant by having an approved State plan and by serving any handicapped child in this age range.

Reference: Jordan, June B. Hayden, Alice H. Karnes, Merle B. and Wood, Mary M. Early Childhood Education for Exceptional Children; A Handbook of Ideas and Exemplary Practices. Reston, VA: CEC 1977. P.17-18.

U.S. Department of Health Education and Welfare, Office of Child Development, A Manual of Polices and Instructions, Manual 6108-1. U.S. Government Printing Office, Washington, D.C.: 1967. P.5.

Head Start Services to Handicapped Children, First Annual Report to the U.S. Congress, HEW, OCD, Washington, D.C., 1973

(See Legal Guidelines: Reading Guide for other references).

Special Education in Iowa

1945 Iowa's first Special Education Law, Iowa Act (ch. 131 section 1-12) established a Division of Special Education within the Department of Public Instruction for the "promotion, direction and supervision of special education."

Handicapped children were defined as those "who are crippled or have defective sight or are hard of hearing or have an impediment in speech or heart disease or tuberculosis, or who by reason of birth defects cannot attend regular public school classes with normal children, and children who are certified by a practicing physician to be emotionally maladjusted or intellectually incapable of profiting from ordinary instructional methods."

Thus was a permissive piece of legislation, that encouraged but did not require local school districts to provide special education.

1947 Statute created a state hospital school for severely handicapped in conjunction with the University of Iowa. The state delegated to the Hospital School the responsibility for educating and treating the severely handicapped. This statute amended compulsory law to require attendance by the severely handicapped. For the first time the severely handicapped came under the scope of compulsory law.

1950's Special education was on the books but appropriations always fell short of claims for excess costs. Rural communities had neither the money nor the handicapped population to make establishment of special education programs realistic.

1955 Legislation authorized county school systems to coordinate special education, but did not require to do so. The state did not reimburse the county units or local school systems for the total costs of their services.

1960 Two studies were completed that showed local school districts were generally unable to finance or administratively cope with demands for special education. County school systems were having difficulty meeting the needs of the handicapped.

1961-1968 A comprehensive study was initiated to determine the needs of mentally retarded citizens in Iowa. Many unmet needs were found. This study gave momentum to the movement for a new approach to special education.

1974 S.F. 1163 Amended the existing permissive special education law in Iowa and provided for all children with special educational needs from 0-21. Area education agencies were created with the following responsibilities:

a) identification of all handicapped children

b) provision for and coordination of special education programs and services

c) assignment of appropriate weighting quotient to each child for funding purposes

Educational opportunities for handicapped must be commensurate with the level provided for non-handicapped children.

For the first time special education was mandatory for all children requiring special education in Iowa.

References: The bulk of the information on Special Education in Iowa came from:

Ferguson, M.D. etal. Special Education: The Struggle for Equal Educational Opportunity in Iowa.

Iowa Law Review June, 1977 62(5), 1283-1487. (Excellent source).

Together We Can - A Closer Look at Section 504 and P.L. 94-142 Department of Public Instruction, Special Education Division, Des Moines, IA, 1977-78.

Key Points of P.L. 94-142

I. CHARACTERISTICS OF P.L. 94-142

The major requirements under P.L. 94-142 are:

1. assurance of extensive child identification procedures;
2. assurance of "full service" goal and detailed timetable;
3. a guarantee of complete due process procedures;
4. the assurance of regular parent or guardian consultation;
5. maintenance of programs and procedures for comprehensive personnel development including in-service training;
6. assurance of special education being provided to all handicapped children in the "least restrictive" environment to the maximum extent appropriate, handicapped children, including children in public or private institutions or other care facilities, should be educated with children who are non-handicapped;
7. assurance of nondiscriminatory testing and evaluation;
8. a guarantee of policies and procedures to protect the confidentiality of data and information;
9. assurance of the maintenance of an individualized program for all handicapped children;
10. assurance of an effective policy guaranteeing the right of all handicapped children to a free, appropriate public education, at no cost to parents or guardian;
11. assurance of a surrogate to act for any child when parents or guardians are either unknown or unavailable, or when said child is a legal ward of the state.

II. ELIGIBILITY

A free appropriate public education will be available for all handicapped children between the ages of three and eighteen within the State not later than September 1, 1978, and for all handicapped children between the ages of three and twenty-one within the State not later than September 1, 1980, except that with respect to handicapped children aged three to five and aged eighteen to twenty-one, inclusive, the requirements of this clause shall not be applied in any State if the application of such requirements would be inconsistent with State law or practice, or the order of any court, respecting public education within such age groups in the State. (Public Law (P.L.) 94-142, 1975, Section 612(2)(B).

* Iowa S.F. 1163 goes beyond P.L. 94-142 in mandating education programs for all handicapped children between 0-21 years old (See Special Education in Iowa Hand-out this section)

III. DEFINITIONS

A. Handicapped children are defined as: mentally retarded, hard of hearing, deaf, speech impaired, visually handicapped, seriously emotionally disturbed, orthopedically impaired, or other health impaired, or children with specific learning disabilities, who by reason thereof require special education and related services. (Sec. 602)

B. Special education: the term "special education" means specially designed instruction, at no cost to parents or guardians, to meet the unique needs of a handicapped child, including classroom instruction, instruction in physical education, home instruction, and instruction in hospitals and institutions.

C. Related services: The term "related services" means transportation, and such developmental, corrective, and other supportive services (including speech pathology and audiology, psychological services, physical and occupational therapy, recreation, and medical and counseling services, except that such medical services shall be for diagnostic and evaluation purposes only) as may be required to assist a handicapped child to benefit from special education and includes the early identification and assessment of handicapping conditions in children.

D. Free appropriate education: means special education and related services which (a) have been provided at public expense, under public supervision, and direction, and without charge, (b) meet the standards of the State-educational agency, (c) include an appropriate preschool, elementary or secondary school education in the State involved, and (d) are provided in conformity with the individualized education program required under section 614(A)(5).

IV. INDIVIDUAL EDUCATION PROGRAM (IEP)

The IEP is mandated under Public Law 94-142 of federal legislation. It is an accountability check for professionals working with the child to translate the federal goal of "an appropriate education for every handicapped child into reality. It is not a binding contract, but a discrete planning process. It is designed to systematize the educational program into an individualized, child-oriented approach that outlines how the child will be educated, what services will be delivered and when this will be accomplished. The program is to be rewritten and reviewed annually. A committee is responsible for developing this plan with the parents as a vital part of this committee.

Each IEP must contain six components:

1. A statement of the child's present levels of educational performance.

2. A statement of annual goals, including short-term instructional objectives.

3. A statement of the specific educational and related services to be provided to the child and the extent to which the child will be able to participate in regular education programs.

4. The projected dates for initiation of services and the anticipated duration of the services.
5. Evaluation procedures for the instructional objectives.
6. Schedule and procedures for review (must be at least annually).

(See example of an IEP and directions in this section).

__References__: Edgar, Eugene Development of Individual Education Programs. University of Washington, Seattle, Washington, 4/78 (Hand-out).

Hayden, Alice and Edgar, Eugene. Developing individualized education programs for young handicapped children, in __Teaching Exceptional Children__. Spring, 1978, 10(3) 67-70.

(See other References under Legal Guidelines: Reading Guide, this section)

KEYSTONE AREA EDUCATION AGENCY
DIVISION OF SPECIAL EDUCATION
INDIVIDUALIZED EDUCATIONAL PROGRAM

EXPLANATORY NOTES

In an effort to facilitate the completion of IEP's on the Keystone AEA format, the following explanatory notes and directions have been written.

GENERAL COMMENTS

1. This IEP format was developed for all Instructional and Support Services to use. Therefore, some items of information may not seem as relevant for one discipline as they are for another, but all blanks need to be completed.

This IEP format is available through the AEA regional office.

2. Instructional programs within the schools may still choose to use an IEP format of their own design. The AEA is providing this format on triplicate paper to permit uniformity among IEP's for all services and to ease the problem of running additional copies. In those schools which do not use this format, AEA personnel will simply attach their completed Parts I, II, and III to the school's format. The school will be responsbile for making additional copies of their IEP's for the children's cumulative and AEA files.

3. This IEP format consists of four different pages:
    - Part I (Cover Sheet)
    - Part II (body of IEP containing objectives)
    - Part III (Annual review)
    - Continuation Page (for use with any above section as needed)

4. The IEP has been developed on NCR paper to allow triplicate copies to be made easily. Copies will be placed as follows:

Pink Copy -- remains with the teacher responsible for implementation
Yellow Copy -- to be placed in LEA cumulative file
Green Copy -- to be sent to AEA file

Special Notes: IEP's need not be typed. However, NCR paper is expensive so try to use space efficiently and avoid wasting sheets.

This IEP is intended to be a working form. Therefore, if changes are made on the implementor's Pink Sheet during the year, it is not required that those changes also be made on the green and yellow copies already on file. These kinds of minor changes can be reflected in the Annual Review. Major changes may be done through the use of Continuation pages (Copies filed appropriately.) Green and yellow copies will be considered skeleton copies of the Pink copy. Care should be taken to keep the pink copies safe. They should be retained in the file of the person responsible for implementation during the year.

At the end of the year or at the time of the Annual Review, all completed pink copies of the IEP are to be filed a) in AEA files by Support personnel and b) in LEA Cumulative files by Instructional personnel.

5. Additional copies of IEP's may be made by those schools wanting parents to have a copy. Parental copies are not required by law, (they may see the child's file upon request) but some schools choose to provide copies.

6. This format has been designed to be as open as possible to be flexible for all disciplines and to allow for a truly individualized program. However, checklists, skill charts, test grids and other standardized lists may be attached to the IEP format as necessary. For example, some restrictive programs use a very sequential or itemized set of objectives. Attachment of these objectives or skill lists may facilitate IEP development. On-going test grids may provide useful compilations of pre-and post test scores.

Decisions to include narrative reports or other written requirements presently added to IEP's should be discussed with the discipline supervisor.

7. Identifying information is at the top of each page to avoid confusion if the pages become separated. The date, student's name and school district are essential on all pages.

8. If a student is receiving services from more than one discipline, the Instructional program will develop the Cover sheet. Then any additional service personnel will write their Present Performance and Goal statements on a Continuation Page, attaching it to the Cover sheet.

This same procedure is also used in the event that a new service begins after the child's IEP has already begun in other areas. For example, a child may begin speech after LD classes have started.

Special Note: Put the date below the page number on Continuation pages.

In cases where the new service (or change) needs parental input, attempts to secure parental signature are recommended as on the cover sheet.

Similarly, to add the short term objectives to initiate a second service for a child, the implementor adds a Short Term Objectives (Part II) page(s) to the existing Part II pages in the child's file.

9. A blank Continuation Page is included for use as additional space is needed for any section of the IEP. Write the name of the continued area at the top of the page in the blank indicated. Be sure to keep the three column format for behavioral objectives.

PART I -- COVER SHEET

Each child will have one new Cover Sheet filled out for each year. There is to be only one cover sheet regardless of the number of services involved. Additional service personnel will utilize Continuation pages and attach them to the Cover sheet. This provides greater continuity in that each child, each year will have one Cover sheet, the objectives for all services in the body of the IEP, and one Annual Review sheet available.

Section I: Self-explanatory; complete all blanks accurately

Note: The date refers to the date on which writing of the IEP basically gets underway. The date is essential as this will be the only indication of the school year in which the child was served.

Section II:

1. "Disability Category": refers to the classification as it is listed on D & E summary sheet as the identified primary disability.

2. "Instructional Program": refers to the actual program placement which may, in some cases, differ from the Disability Category, e.g. an ED child may be served in an LD-RC (resource) program.

   Note: Support Services may omit this blank and the Disability Category blank. They will report under the "Support Services" area.

3. "Support Services": All Support services are listed here. Include LEA support services such as remedial reading, regular counseling with school counselor, etc.

4. "Special Equipment": refers to all specialized apparatus a student may need such as wheel chair, auditory trainer, parallel bars.

5. "Transportation": refers to the provisions which will be made to transport children who required transportation to a special program.

Section III:

Complete this portion only if the student comes to the Agency for services but is still a resident of another school district or AEA.

Section IV:

The Present Performance is intended to include a summary of the present levels of functioning for the child. Since a child may be involved in more than one program, the Present Performance Statement should address each problem area citing strengths as well as weaknesses. Statements are to reflect specific behaviors that are measurable and observable.

It is suggested that Instructional programs address the five basic areas of assessment: intellectual, academic, perceptual motor skills, language skills, and social/emotional areas.

Support personnel need address only strengths and weaknesses pertaining to their area.

A continuation page may be necessary.

In instances where this information repeats what was earlier written for the Annual Review statement the previous year, the writer may state, "See Annual Review--1978-79".

Section V:

The names of all individuals participating in the developing of or reviewing of the IEP should be listed. These are not necessarily the same individuals who were involved in the staffing. The IEP committee members may include parents, classroom and special teachers, consultant, administrator (or representative), and any others deemed appropriate.

Section VI:

In the event that a parent does not actually see the IEP and is not listed as part of the Committee in Section V, it is advisable to indicate here how and when the IEP information was given to the parents, e.g. "Invited to conference on IEP by phone 9/18/79" "Conference scheduled for 9/22/79, but parents did not appear."

Note: Parents' signatures on the IEP are recommended, but not required by law. Parents must be made aware of the intended objectives of the program(s). As a safety measure, having parents sign the cover sheet will protect the program personnel, if parents might claim that they had not been involved in the IEP.

Signatures indicate that the Parents are aware of the IEP. It is not asking for their consent for the type of help. It is an opportunity for parents to give input or ask questions.

If contact with parents only comes at the times of a regular education Parent-Teacher conference, parents may sign the IEP at the time. However, if the conference comes long after the child has begun his special service, efforts should have been made to obtain parental input at the beginning of the service period.

Section VII:

Annual Goals: The goals for each discipline's service should be listed here and correspond with the goals to be developed in Part II of the IEP. Limit the goals to what can reasonably be accomplished in one year. If additional goals need to be added during the year, do so by adding a Continuation page labeled as "Goals".

PART II

Section I:

1. "Program/Service" refers to the program or service which will be implementing the objectives on this page. Each discipline will complete this section on its own, but place it under the same Part I cover Sheet.

2. "Initiation of this Service": state the date or approximate date on which the actual service described on this page will begin.

3. "Date of Annual Review": indicate the approximate date that the IEP will be reviewed. This must be done at least once every 12 month period. Writing in a month and year will be sufficient.

4. "Time in Special Program": indicate the hours and/or minutes and frequency the child will be served, e.g. 30 min. 3 times a week.

Section II:

1. "Annual Goal(s)":

   1. Instructional programs may write one goal per page. This may mean 2 or 3 of these pages will be used depending on the number of goals established.

   2. Support services may want to write "refer to Part I, Section VII" or write one goal per page, if so desired.

2. "Present Performance": This statement is intended to be more specific than the general Present Performance statement on Part I-Cover Sheet. For example, if the Annual Goal states improvement in subtraction skills, the teacher may specifically cite here the subtraction skills that do exist, learning methods or other pertinent information regarding functioning in this particular area.

If the Cover Sheet adequately describes the Present Performance in detail, just write "refer to Part I, Section VII."

3. "Persons Responsible for Meeting this Goal": List the names and positions of all teachers or support personnel who will be involved in carrying out the objectives stated on this page. These are the people actually doing the teaching, counseling, or therapy required to meet the objectives.

Section III:

1. "Short Term Objectives": Objectives should include the specific performance, how well it is to be done and when, if possible. Conditions for performance are also included. These behavioral objectives need to be listed in sequence and can be broken down to be as specific as the writer wishes. Generally, objectives are written which span 1 to 3 months of time. The task analysis of each objective forms the basis of daily lesson plans.

e.g. "By December 15, 1979. Bill will complete the in/out program on Step 1 - A basic Concept Development Program with an overall accuracy of 80%."

"Given thirty minutes and assistance with spelling, Ann will be able to write a five sentence paragraph using complete sentences with no more than two punctuation errors."

Note: Some restrictive programs may want to subdivide their objectives into categories such as Optimum Performance Criteria, Expected Performance Criteria and Least Expected Performance Criteria.

IEP implementors may want to write objectives referring to the completion of specific units, chapters or pages of certain materials. In other cases, the objective itself will not name the materials, but the possible materials for use will be listed under the Materials/Strategies column.

Skill sequences are available in many textbooks, test guides, curriculum guides, etc. It is important that appropriate sequences of skills be utilized.

2. "Materials/Strategies" state the main type of materials, teaching methods, necessary classroom modifications which will be needed or used. This column is a skeleton plan listing 3 or 4 techniques or materials to be used in the program. A teacher is free to build on this or make changes as the year goes on.

3. "Comments": this space allows room to note any needed modifications in objectives or strategies. Comments may be made regarding useful techniques and their results, changes that need to be made, or resulting achievement (or lack of it) which may be helpful in future work with the child. It is an area open for any remarks on progress, but cannot be substituted for an official Annual Review statement which is required by law.

Note: Reference might be made in this column to an attached test grid or skill chart.

PART III

One Annual Review sheet is completed at the time of the annual review. Each service completes its own statement here through the use of Continuation pages as needed. Note that an Annual Review statement is necessary at least once every 12 month period, e.g. if a child enters a program in October, the annual review need not occur until the following October. If more than one service is being received, it may simplify matters to agree upon one approximate annual review date.

Section I: Identifying information.

Section II: Summarize the progress and accomplishments for the annual goals and/or objectives presented in the IEP. Post-test scores and their interpretation may be included. If the annual review statement repeats information for "Present Performance" on the child's new IEP, write "See Present Performance 1979-80".

Ideally, the two areas will not be repetitious because of this distinction: The annual review summary states the actual results or outcomes of the IEP as it was taught during the year. The new Present Performance picks up where the outcomes leave off. That is Present Performance states the beginning skill levels for the new IEP. This would correct for cases where there may be a summer lag or scattered skills.

Section III:

"Recommendations": State any suggestions for changes in placement or program additional support services, next year's goals, plans for exiting the child from the service. It is also important to give the reason why these recommendations are being made.

> Note: The annual review is not a D & E staffing to change programming. The participants of the annual review may recommend that a staffing be held to make the necessary program change.

Section IV: List those individuals participating in the Annual Review Session. By law, participants should include: the students' teacher(s), another LEA representative, parents, student where appropriate, and others deemed appropriate (consultant, psychologist, others who have worked with the child). If parents were unable to participate, document efforts to invite their involvement as was done on the Cover sheet.

It is possible and sometimes desirable to stagger Annual Reviews so that they occur throughout the school year instead of doing all reviews at the same time. This decision can be made by the IEP committee.

From: Guidelines & Procedures Manual for Special Education Elkader, Iowa: Keystone Area Education Agency, Division of Special Education.

Copies to:
PINK: Teacher responsible for implementation
YELLOW: LEA Cumulative File
GREEN: AEA File

KEYSTONE AREA EDUCATION AGENCY
DIVISION OF SPECIAL EDUCATION
INDIVIDUALIZED EDUCATIONAL PROGRAM
- COVER SHEET -

Part I p. ____

I. DATE ____
STUDENT ____
D.O.B. ____ AGE ____ SEX ____
PARENT/GUARDIAN ____
MAILING ADDRESS ____
____
PHONE ____

II. DISTRICT ____ BUILDING ____
GRADE/LEVEL ____ DISABILITY CATEGORY ____
SUPPORT SERVICES ____
____
SPECIAL EQUIPMENT ____
____
TRANSPORTATION ____

INSTRUCTIONAL PROGRAM ____

III. (for non-residents only)
Resident AEA# ____
Resident School District
____

IV. Summary of Present Performance:

V. IEP Committee (Signatures are optional)

Participant	Position

VI. Type of Parental Contact and Date(s):

____
____
____
____

VII. Annual Goals

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Copies to:
PINK: Teacher responsible for implementation
YELLOW: LEA Cumulative File
GREEN: AEA File

KEYSTONE AREA EDUCATION AGENCY
DIVISION OF SPECIAL EDUCATION
INDIVIDUALIZED EDUCATIONAL PROGRAM

Part II p.____

I.

DATE ______________________ DISTRICT ______________________ BUILDING ______________________

STUDENT ______________________ GRADE/LEVEL ______________________ PROGRAM/SERVICE ______________________

INITIATION OF THIS SERVICE __________ DATE OF ANNUAL REVIEW __________ TIME IN SPECIAL PROGRAM/SERVICE __________

II.

ANNUAL GOAL(s):

PRESENT PERFORMANCE LEVEL:

PERSON(s) RESPONSIBLE FOR MEETING THIS GOAL:

III. SHORT TERM OBJECTIVES (Include evaluation criteria and procedures)	MATERIALS/STRATEGIES	COMMENTS
(State what the student will do, how well and by when)		

Copies to:
PINK: Teacher responsible for implementation
YELLOW: LEA Cumulative File
GREEN: AEA File

KEYSTONE AREA EDUCATION AGENCY
DIVISION OF SPECIAL EDUCATION
INDIVIDUALIZED EDUCATIONAL PROGRAM
- ANNUAL REVIEW -

DATE________________

Part III p.—

I. STUDENT____________________ GRADE/LEVEL______ DISTRICT________________ BUILDING____________________

II. Summary of IEP: (Statements regarding progress for each Annual Goal): PROGRAM/SERVICE__________________

III. Recommendations :

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IV. Persons involved in Annual Review: (name and position; signatures are optional):

______________________________ ______________________________

______________________________ ______________________________

Copies to:
PINK: Teacher responsible
for implementation
YELLOW: LEA Cumulative File
GREEN: AEA File

KEYSTONE AREA EDUCATION AGENCY
DIVISION OF SPECIAL EDUCATION
INDIVIDUALIZED EDUCATIONAL PROGRAM
CONTINUATION SHEET

P. ________

CONTINUATION OF ____________________ STUDENT ____________________ DISTRICT ____________________
(Section)

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55

MEDICATIONS FOR SPECIAL EDUCATION STUDENTS

12.29 (4) Medications. Each school district and area education agency shall establish written policies concerning the administration of prescribed medication by school personnel during school hours. The following requirements shall be met:

a. A statement of the physician's directions specifying frequency, amount, and method of administration signed by the prescribing physician, must be filed at the school.

b. A physician's description of anticipated reactions of the pupil to medication must be filed at the school.

c. The medicine shall be maintained in the original prescription container which shall be labeled with:
   (1) Name of pupil.
   (2) Name of medication.
   (3) Directions for use.
   (4) Name of physician.
   (5) Name and address of pharmacy.
   (6) Date of prescription.

d. A record of each time medication is administered shall be maintained to include the pupil's name, date, time, and person administering the medication.

e. A parental signature on a statement requesting and authorizing school personnel to administer the medicine in accord with the prescription.

f. Each school or facility shall have designated in writing, specific locked and limited access spaces within each building to store pupil medication.

   (1) In each building that houses a full-time registered nurse, access to medication locked in a designated space shall be under the authority of the nurse.

   (2) In each building that houses a less than full-time registered nurse, access to the medication shall be under the authority of the principal.

g. The person responsible for administering the medication shall have ready access to the information regarding the medication filed at the school.

EMERGENCY-DISASTER PLANS FOR SPECIAL EDUCATION STUDENTS

12.29 (3) In each facility housing handicapped pupils who need assistance in meeting all potential emergencies and disasters, there shall be a written plan maintained at that facility. This plan will contain emergency and disaster procedures which will be clearly communicated to and periodically reviewed with staff responsible for such pupils. The emergency plan shall include:

a. Plans for the assignment of personnel to specific tasks and responsibilities.

b. Instructions relating to the use of alarm systems and signals. If combination visual and auditory warning devices do not exist, the plan shall include specific provisions for warning hearing impaired pupils.

c. Information concerning methods of fire containment.

d. Systems for notification of appropriate persons and agencies.

e. Information concerning the location and use of firefighting equipment.

f. Specification of evacuation routes and procedures.

g. Posting plans and procedures at suitable locations throughout the facility.

h. Evacuation drills held as required in section 100.31 of the Code. Evacuation drills will include actual evacuation of pupils to safe areas.

i. An evaluation for each evacuation drill.

REFERENCE: Rules of Special Education
#H8568-(1977), Page 27,
Rule 12.29(4) Medications

Rules of Special Education
#H8568-(1977), Page 26,
Rule 12.29(3) Facilities, Materials,
and Equipment

Diagnosis of Physical Abuse Should Be Considered When Some of the Following Are Present

WHEN THE PARENT:

1. Shows evidence of loss of control, or fear of losing control.
2. Presents contradictory history.
3. Projects cause of injury onto a sibling or third party.
4. Has delayed unduly in bringing child in for care.
5. Shows detachment.
6. Reveals inappropriate awareness of seriousness of situation (either overreaction or underreaction).
7. Continues to complain about irrelevant problems unrelated to the injury.
8. Personally is misusing drugs or alcohol.
9. Is disliked, for unknown reasons, by the physician.
10. Presents a history that cannot or does not explain the injury.
11. Gives specific "eye witness" history of abuse.
12. Gives a history of repeated injury.
13. Has no one to "bail" her (him) out when "up tight" with the child.
14. Is reluctant to give information.
15. Refuses consent for further diagnostic studies.
16. Hospital "shops."
17. Cannot be located.
18. Is psychotic or psychopathic.
19. Has been reared in a "motherless" atmosphere.
20. Has unrealistic expectations of the child.

WHEN THE CHILD:

1. Has an unexplained injury.
2. Shows evidence of dehydration and/or malnutrition without obvious cause.
3. Has been given inappropriate food, drink and/or drugs.
4. Shows evidence of overall poor care.
5. Is unusually fearful.
6. Shows evidence of repeated injury.
7. "Takes over" and begins to care for parents needs.
8. Is seen as "different" or "bad" by the parents.
9. Is indeed different in physical or emotional makeup.
10. Is dressed inappropriately for degree or type of injury.
11. Shows evidence of sexual abuse.
12. Shows evidence of repeated skin injuries.
13. Shows evidence of repeated fractures.
14. Shows evidence of "characteristic" x-ray changes to long bones.
15. Has injuries that are not mentioned in history.

From: Kempe, C.H. and Helfer, R.E. (eds.) Helping the Battered Child (See below)

CHILD ABUSE

Kempe, C.H. and R.E. Helfer (eds.), Helping the Battered Child and His Family.
Philadelphia: J.B. Lippincott Co., 1972.

A good resource on abused children and their families. Summarizes what to look for in abuse cases.

Lakin, Jean Ann, Child Abuse and Neglect: A Manual for School Personnel.
Iowa City, Ia.: Regional VII Child Abuse and Neglect Resource Center, Institute of Child Behavior and Development, 1978. ($1.60)

An excellent resource for teachers and administrators. Gives very clear descriptions of what to look for in abuse cases, and procedures for reporting. Highly recommended for all school personnel.

SUPPLEMENTAL SECURITY INCOME INFORMATION (SSI)

What is the limit on Resources?

$1500 for an individual, $2250 for couple, but a home, car personal effects, or household goods or reasonable value generally don't count as resources.

Who is Considered Blind?

A person with vision no better than 20/200 even with glasses or tunnel vision (limited visual field of 200 or less)

Who is Considered Disabled?

A person who is unable to work because of a physical or mental condition expected to last a year or more or result in death. Disabled children may qualify, too.

How Much Can SSI Pay?

Eligibility for SSI checks and the amount of payment depends on how much other income the person has. But people can be getting a small pension, or doing some work and still get help from SSI.

For More Information:

People can apply for SSI or get more information at any social security office.

From: U.S. Government Poster in Post Office.

LEGAL GUIDELINES: READING GUIDE

A Parent's Guide to Special Education. Iowa Association for Retarded Citizens, 1707 High St., Des Moines, IA.

Cohen, Shirley, Semmes, M. and Guralnick, M. Public Law 94-142 and the Education of Preschool Handicapped Children. Exceptional Children. 1979, 45(4), 279-285.

Ferguson, Michael et al. Special Education: The Struggle for Equal Educational Opportunity in Iowa. Iowa Law Review. June, 1977, 62(5). 1281-1487.

Guralnick, M. (ed.) Early Intervention and the Integration of Handicapped and Non-Handicapped Children. University Park Press, Baltimore, 1978.

Hayden, Alice and Edgar, Eugene. Developing Individualized Education Programs for Young Handicapped Children. Teaching Exceptional Children. Spring, 1978. 10(3) 67-70.

Overview of Due Process Procedures. Keystone Area Education Agency. (One page sheet detailing parents rights under P.L. 94-142 and Section 504.) Available from: Keystone Area Education Agency Field Office (Please see REFERRAL PROCEDURES section for addresses of offices and phone numbers.)

Pratt, Eugene C. et al. Guidelines and Procedures Manual for Special Education. Keystone Area Education Agency One, Special Education Division, Elkader, IA.

Questions and Answers on P.L. 94-142. NADSE, Suite 610E, 1201 16th St. N.W., Washington, D.C. ($2.00) (Answers to most frequently asked questions on P.L. 94-142.)

Rules of Special Education. Department of Public Instruction, Special Education Division, Des Moines, IA, 1977.

Section 504 of the Rehabilitation Act of 1973. Handicapped Persons Rights Under the Federal Law. Available from: Department of HEW, Office of Civil Rights, Main HEW Bldg., Washington, D.C. 20201.

Together We Can - A Closer Look at Section 504 and P.L. 94-142. Department of Public Instruction, Special Education Division, Des Moines, IA, 1977-78.

Torres, Scottie (ed.) A Primer on Individualized Education Program for Handicapped Children. CEC, Reston, VA, 1977.

Write: Your United States Representative or United State Senator for a copy of P.L. 94-142 (suggested by Council for Exceptional Children.)

ADDITIONAL SOURCES OF YOUR CHOICE:

EVALUATION MATERIALS

E

* Are You An Effective Teacher?

A good teacher has "the ability to recognize that a pupil is performing to the best of his or her ability, to communicate approval of this effort, and to encourage continuance of such effort." (Lynch etal., 1976) This checklist suggests a process for instructing each preschool handicapped child. Do you have an organized, systematic approach to instructing children?

1. ASSESS
Do you find out as much about the child as possible by:
__________ - interviewing previous teachers or associated professionals?
__________ - talking with the child's parents?
__________ - observing the child in a classroom setting?

Do you administer or review the results of:
__________ - any formal tests (diagnostic, developmental, or achievement?)
- any informal tests such as
__________ - teacher-made tests?
__________ - skill specific tests?
__________ - placement tests from various curricula?
__________ - medical information (where indicated)

2. ESTABLISH LONG TERM OBJECTIVES (Sometimes Called Goals)
Using the information gathered from Initial Assessment, do you:
__________ - identify important areas of focus for the year?
__________ - set specific goals for the pupil to achieve for the year?
__________ - write these goals in measurable, behavioral terms so that they include the learner, the behavior, the conditions under which the learning will occur, and the criteria for success?
*"Will this skill provide the individual with a functional behavior that will directly enhance his ability to live independently?" (Hayden, Edgar, 1978).

3. ESTABLISH SHORT TERM OBJECTIVES (Sometimes called Objectives)
For each long term objective, do you:
__________ - identify and sequence steps which lead to that objective? (task analyze)
__________ - write these intermediate objectives in measurable, behavioral terms so that they include the learner, the behavior, the conditions under which the learning will occur, and the criteria for success?

4. DEVELOP/WRITE AND IMPLEMENT INSTRUCTIONAL PROGRAM (Sometimes called Strategies/Implementation)
Do you establish a program which will help the learner reach each short term objective by:
__________ - identifying or developing materials, tasks, physical arrangements and schedules
__________ - identifying instructional procedures or techniques?
__________ - identifying reinforcers?

For each short term objective, do you:
____________ - specify what behavior you are going to measure and
____________ - choose a measurement system which is compatible with that behavior and which provides you with specific information about the learner's progress toward the objective?

Do you check to see that:
____________ - the written instructional procedure includes all variables critical to the delivery of the program?
____________ - the measurement criteria you specified provide information about the pupil's progress?

5. EVALUATE PROGRESS (Sometimes called Evaluation)

If the learner is not progressing toward an objective, do you:
____________ - change, modify or adapt the program components and/or
____________ - provide additional reinforcers and
____________ - monitor the effectiveness of the interventions can be made if necessary?

Do you have a system for:
____________ - intermittent review of information and skills learned? (such as, maintenance checks)

Do the skills generalize to:
____________ - now settings, people, materials, and language cues?

*The parents and support service professionals should be involved in this process to facilitate a TEAM approach, as much of this information will be in the child's IEP.

Reference: Williams, Brown and Certo, AAESPH Review, 1975 1 (1) 1-39.

Adapted From: Lynch, V. McGulgan, C. and Shoemaker, S. An Introduction to Systematic Teaching. Experimental Education Unit, University of Washington, Seattle and Support Competency-Assistance and Training Project, State of Idaho. June, 1976. (Working Paper No. 61-revised)

Instructional Programming

1) Assessment--collecting data and information about a child in order to formulate appropriate decisions concerning the child's goals and objectives.

2) Goal--a statement of purpose written on an annual basis for the child

3) Objective--break the long term goal down into short-term steps. There are four parts to an objective: (ABCD format)*
    - A) Audience - Designation of the recipient of the instruction
    - B) Behavior - Action which is the desired outcome of the instruction
    - C) Condition - Describes the situation(s) under which desired action will occur
    - D) Degree - Criterion for determination of acceptable skill action and timeline - date when it will be accomplished

4) Task Analysis (Target Tasks)--breaking down objectives into the daily tasks which lead to the final behavior or objective. The final task is the same as the objective. Task analysis should be broken down so that instruction starts where success can occur and moves on from there.

5) Strategies/Techniques--these are the approaches which will be utilized to teach the specific tasks. Examples are:
    1) Modeling - Teacher shows child (i.e. demonstration)
    2) Verbal instruction - Teacher tells child what she/he is expected to do
    3) Manual guidance - Teacher physically manipulates child through a task giving verbal guidance as the task proceeds
    4) Self-talk - Teacher talks a task through while doing it (child can be active, doing task or passive, observing task)
    5) Verbal cues - Teacher suggests to child some spoken idea(s) and/or directions toward the completion of a task
    6) Nonverbal cues - Teacher suggests to child through gesture(s), idea(s), and/or directions toward the completion of a task
    7) Visual cues - Any visual stimulus which assists the child in succeeding at a task (i.e. drawing shapes from a model, using pictures to assist the child in retelling a story

6) Evaluation - determining the success of the program for the child. Looking at each component above to see if you are effective in meeting the child's needs.

References: Functions of the Placement Committee in Special Education: A Resource Manual. National Association of State Directors of Special Education.

*Writing Behavioral Objectives by William J. Kryspin.

TIPS FOR WRITING EDUCATION REPORTS

1. Use correct spelling and grammar. It should be written in an understandable (observable) language, that contains a minimum of jargon and technical terms. Define terms that may be unfamiliar to others.

2. Organize the report into sections (i.e. motor, communication, self-help, social, cognitive, school recommendations, etc.)

3. Use examples to add clarity to the report.

4. Be sure suggested activities are consistent with the child's skill levels.

5. If the child receives therapies, give only practical classroom ideas, that you have been asked to utilize in the room. You can add in that section, PLEASE REFER TO __________________ Therapy report for more details.

6. Try to keep the report to 1-2 pages. If it is too long people are less likely to read it.

7. Summarize the report at the end under School Recommendations, this brings closure to the report and helps reiterate key points.

8. Giving a copy of the education report to the parents makes for a more consistent team effort.

FINAL QUESTIONS:

1. Does the education report give a clear, specific picture of the child's abilities, strengths, needs? Is it positive, as well as realistic.

2. Is the report well-written? Can other professionals working with the child read it and interpret the report the way you do?

IS THE CLASSROOM DOING WHAT IT'S SUPPOSED TO DO?

The Physical Environment

1. Can quiet and noisy activities go on without disturbing one another? Is there an appropriate place for each?
2. Are activity centers defined so that children know where to use the materials?
3. Are a variety of materials available on open shelves for the children to use when they are interested? Are materials on shelves well-spaced for clarity?
4. Is self-help encouraged by having materials in good condition and always stored in the same place?
5. Can children engage in activities without being disturbed or distracted by others?
6. Are materials stored in individual units so that children can use them alone without being forced to share with a group?
7. Are cushioning materials used to cut down extraneous noise--rug under blocks, pads under pounding bench?
8. Are set-up and clean-up simple and expected parts of the child's activity?
9. Is attractive display of children's work possible on the child's eye level?
10. Do the children feel in control of and responsible for the physical environment?

The Interpersonal Environment

1. Is there a feeling of mutual respect between adults and children, children and children?
2. Is the physical environment enough under control so that the major part of the adult's time is spent in observing or participating with children?
3. Do adults observe children's acitivity and intervene only when it is beneficial to the child?
4. Do adults have "growth goals" for each child based on the needs they have observed in each child? Is individualized curriculum used to reach these goals?
5. Do children feel safe with one another?
6. Do the adults show children how to help themselves?
7. Are children encouraged to learn from one another?
8. Are there opportunities for children to play alone, participate in a small group, and participate in a large group?
9. When limits are placed, do adults use reasoning and consistently follow through? Are limits enforced?
10. Are the adults models of constructive behavior and healthy attitudes?
11. Is there an overall warm interpersonal environment?

Activities to Stimulate Development

1. Are there many opportunities for dramatic play: large housekeeping corner, small doll house, dress-up clothes for boys as well as girls?

2. Are there a variety of basic visual art media: painting, drawing, clay, salt-flour dough, wood glue sculpture, fingerpaint, collage?
3. Is music a vital part of the program: records, group singing, instruments, dancing?
4. Is language stimulation varied: reading books, games with feel boxes, flannel boards, questions and answers, conversation, lotto games, classification games? Are limits enforced through verbal control and reasoning?
5. Are there small manipulative toys to build eye-hand coordination and finger dexterity?
6. Are there some opportunities to follow patterns or achieve a predetermined goal: puzzles, design blocks?
7. Do children do real things like cooking, planting seeds, caring for animals?
8. Are field trips planned to give an enlarged insight into the world around us? Is there adequate preparation and follow-up after trips?
9. Are there repeated opportunities for children to use similar materials? Are materials available in a graded sequence so that children develop skills gradually?
10. Are children involved in suggesting and planning activities? How is free choice built into the program?
11. Are new activities developed by teachers as they are suggested by the interests of individual children?
12. Is the range of activities varied enough to present a truly divergent curriculum? Are there opportunities for learning through exploration, guided discovery, problem solving, repetition, intuition, etc.? Is there provision for children to learn sensorially as well as verbally?

Schedule

1. Is the time sequence of the school day clear to both teachers and children?
2. Has the schedule been designed to suit the physical plant and particular group of children in the school?
3. Are long periods of time scheduled to permit free choice of activities and companions?
4. Are other groupings provided for in the schedule, e.g., small group activities, one to one adult-child contacts, large group meetings, etc.?
5. Is the schedule periodically reevaluated and modified? Are changes in schedule and the reasons for these changes made clear to both staff and children?

From: Harms, Thelma. Evaluating Settings for Learning. In Baker, Katherine. read: Ideas That Work With Young Children. Washington, D.C.: NAEYC, 1972.

Assessment of Severely Handicapped Preschoolers

Criterion referenced check lists, skill lists, and developmental scales are common tools used by preschool handicapped teachers. The child usually receives a plus or a check if he exhibits the behavior and can perform the task. He receives a minus or zero if he does not exhibit the behavior or cannot perform the task. This may work fine for some children, but what about the more severely handicapped youngsters? If teachers use the same scoring criteria, they sometimes see little evidence of change from one assessment to the next. A system of scoring that is more SENSITIVE to the child's behavior is needed.

By adapting the scoring key used by Somerton and Turner on the Pennsylvania Training Model, the teacher could use the following criteria:

ASSESSMENT RATING SCALE

SCORE:	CRITERIA:
0	NO COMPETENCY 0% correct response
1	SLIGHT COMPETENCY 10% correct response or child can perform the task 1 of 10 times correctly
2	MODERATE COMPETENCY 20-30% correct response or child can perform the task 1 of 4 times correctly or child can perform the task 2 of 10 times correctly or child can perform 3 of 10 times correctly
3	ADEQUATE COMPETENCY 70-75% correct response or child can perform the task 3 of 4 times correctly or child can perform the task 7 of 10 times correctly
4	COMPLETE COMPETENCY 90-100% correct response or child can perform the task 4 of 4 times correctly or child can perform the task 9 of 10 times correctly or child can perform the task 10 of 10 times correctly

A scoring criteria like the one suggested above could result in:

1) The teacher would see the smaller behavioral changes in the child from one assessment to the next.

2) She would be able to share more crystallized, specific information with support service professionals and the parents regarding each child's progress.

3) Used in conjunction with the ongoing data she keeps on each child, the teacher would have a more concise picture of:

   a) Are the teaching strategies working or not?
   b) Is the child progressing in skill development or behavioral changes?
   c) Is she having an effect as the child's teacher?

Reference: Somerton, Ellen and Turner, Keith D. Pennsylvania Training Model Individual Assessment Guide, Reston, VA: CEC, 1976.

PERFORMANCE OBJECTIVE

Name: ______________________ Date Initiated: ______________

Area: ______________________

Goal:

Behavioral Objective:

Entry Behavior:

Program Strategy: (Analysis of task in numbered sequence-implementation-materials)

1.
2.
3.
4.
5.
6.
7.

Reinforcement:

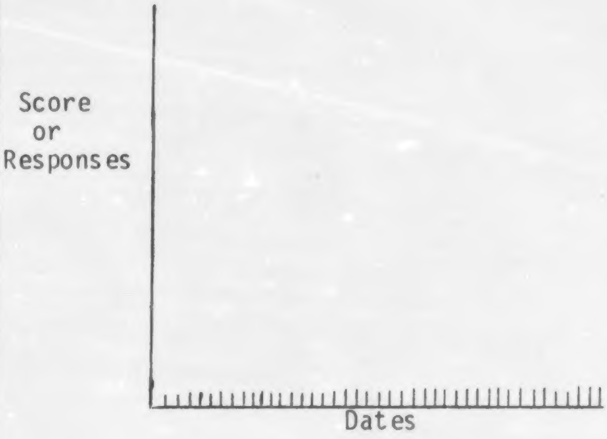
Daily Evaluations:

+ = Behavior performed or number correct responses.

- = Behavior not performed.

Criteria =

Graphed Data:



Summary Evaluation/Comments:

Date Completed ______________ Signed ______________

Form by: Linda Boerner.
Used with permission.

E

Screening - Assessment - Evaluation - Diagnostic: AEA #1 and LEA's

The following list contains some of the tools/instruments used by Keystone Area Education Agency staff and local education agencies (LEA's) within AEA #1 to screen-assess-test-diagnose preschool children, suspected of having special needs.

Speech Language Pathologists

Peabody Picture Vocabulary Test

Prespeech and Feeding Assessment Scale by Morris

Sequenced Inventory of Communication Development

Receptive-Expressive Emergent Language Scale (REEL)

Verbal Language Development Scale, Meacham

Preschool Language Scale, Zimmerman

Observation!

Psychologists

Stanford-Binet

Wechsler Preschool and Primary Scale of Intelligence

Cattell Infant Intelligence Scale

Bayley

Merrill Palmer Preschool Attainment Record (sometimes)

Hiskey-Nebraksa

Slossom

Observation!

Physical and Occupational Therapists

Bayley (in conjunction with psychologist)

Prespeech and Feeding Assessment Scale, Morris

Milani - Comparetti Test of Reflex Development other Homemade Evaluation Forms

Ayres

Bruininks - Oseretsky

Scale that Combines Gesell-Denver-Bayley (homemade)

Goniometric Testing (for Range of Motion

Refer to Fiorentino's Books

Observation!

Audiologists

Pure tone speech and impedant audiometry

Observation!

Preschool Teachers and Preschool Consultants

(Please refer to Hand-out on Preschool Handicapped Teachers)

Observation!

Special Education Nurse/School Nurse

Developmental History Forms

Vision Screening (Snellen E, Peek-A-Boo, Observation, etc.)

Social Workers

Alpern-Boll Developmental Scale

Burke's Behavioral Rating Scale

Preschool Attainment Record

Vineland Social Maturity Scale (occasionally)

Observation!

Screening

Comprehensive Identification Process (CIP) 2 1/2 - 5 1/2 years old

ABC Inventory - to determine readiness for Kindergarten

Kindergarten Round-Up/Clinic Screening Instruments

Observation!

SCREENING-ASSESSMENT-EVALUATION-DIAGNOSIS

The following items are a selected list of common instruments/tools often used with preschool handicapped children.

ABC Inventory. Research Concepts, Muskegan, Michigan. (Screening tool).

Alpern, Gerald D., and Boll, Thomas J. Alpern-Boll Developmental Profile. Psychological Development Publications, Indianapolis, 1972. (0-preadolescent standardized)

Anderson, Kratz, and Hanson. Preschool Developmental Assessment with Activities: A Multi-Sensory Approach. Special Education Instructional Materials Center, St. Paul, 1978.

Anderson, Ruth, et al. Communication Evaluation Chart from Infancy to Five Years. Educators Publishing Service, Cambridge, Massachusetts, 1963.

Ayres Southern California Sensory Integration Tests. Western Psychological Services, Los Angeles, CA, 1972. (4-10 years).

Arizona Articulation Proficiency Scale. Western Psychological Services, Los Angeles, CA. (3-11 years).

Bangs, T.E. Language and Learning Disorders of the Pre-Academic Child. Appleton-Century-Crofts, New York. (0-3 years).

Bannatyne et al. BKR Scale. BKR Education Projects, Inc., Miami, 1971.

Bayley, N. Bayley Scale of Infant Development. Psychological Corporation, New York, NY.

Behavioral Characteristics Profile. Vort Corporation, Palo Alto, California. 163 items (0-30 months standardized) (2400 behaviors)

Blank, M. et al. Preschool Language Assessment Instrument. In the Language of Learning - The Preschool Years. Grune and Straton, NY 1978.

Bluma, S.M., Shearer, M.S., Frohman, A.H. and Hilliard, J.M. Portage Guide to Early Education. The Portage Project, CESA 12, Portage, WI. 1976. (0-6 checklist and curriculum cards.)

Boehm Test of Basic Concepts. The Psychological Corporation, NY, 1970.

Brazelton, T. Berry. Neonatal Behavioral Assessment Scale. Clinics in Developmental Medicine No. 50, Spastics International Medical Publications, London: Heinemann, Philadelphia: Lippincott, 1973.

Brigance Inventory of Early Development. Curriculum Associates, Woburn, Mass., 1978.

Bruininks Oseretsky Test of Motor Proficiency. American Guidance Service, Circle Pines, Minnesota, 1977. (4 years - 18 years).

Caldwell, Bette M. The Preschool Inventory. Educational Testing Service, Princeton, NJ, 1967.

SCREENING-ASSESSMENT-EVALUATION-DIAGNOSIS

CARE. L.A. Superintendent of Schools, 9300 Imperial Hwy, Downey, Cal., (0-8 years).

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ADDITIONAL SOURCES OF YOUR CHOICE:

PARENT INVOLVEMENT

What Do Parents Want?

Parents participated in a survey in which they were asked to rank from one (the most important) through 12 (the least important), the statements listed below. How many of these do you accomplish when working with parents of handicapped children?

1. Tell us the nature of our problem as soon as you know the nature of the problem
2. Help us to understand our problem (give us the information at our own pace which we need to deal with our problem)
3. Know your resources (have first hand information about the people and agencies who help us)
4. Help us to see this is OUR problem (do not take over for us--support our decision--help us to explore alternatives)
5. Remember the importance of attitude--(be objective about our problem, but respect our feelings)
6. Watch your language--avoid jargon--use terms we can understand
7. Never put is on the defensive--do not make us justify our past actions--help us to see our present and future tasks
8. Always see both parents
9. We are parents and you are professionals; regardless of how objective we may seem, remember, our loyalties are to our child
10. Recognize our good intentions even though our actions may not meet your standards
11. Remember, we parents are just people--neither saints, nor sinners
12. Keep your professional biases and jealousies to yourself

*1 is most important, 2 next most important, etc.

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Professionals: Are you Listening?

In our concern for the needs of handicapped children--both in and out of school--the needs of parents are often overlooked. They have problems, too--often critical ones. What's happening to help them? In this era of progress in the classrooms, are things changing for parents?

Of course, when things improve for kids, they improve for parents. If you've struggled for years to get your child placed in a good educational program, certainly a clear connection between the quality of services open to your child and your own ability to lead a happy, normal life. Rights of children and rights of parents are sides of the same coin.

But alot happens to parents from the time their disabled child is born, or from the moment they suspect--or learn--that their son or daughter has a handicap. No special training equips them for this turn of fate, for the feelings within themselves or the attitudes of others. The mother who wrote that she and her husband believed in the "that's how the cookie crumbles" philosophy . . . and that she could accept the fact that their child just happened to end up at the bottom of the statistical odds, first went through an agonizing period of personal adjustment.

There is an enormous unmet need

The emotional saga involved is well known to most parents of handicapped children. Experiences differ, and so do the intensity and impact of these experiences. But it's important to ask: who is available--or should be--to give encouragement or hope or practical advice at this particularly difficult time in a family's life?

Judging from letters we receive from parents all over the country, there is an enormous unmet need for support. In his book, The Disabled and Their Parents: A Counseling Challenge, Leo Buscaglia writes: "It is appalling how little attention is given, still, by medical doctors, psychologists and educators to counseling of disabled persons and their families." He goes on to call on "all those in the helping professions to become more cognizant of the desperate need the disabled person and his family have for good, sound, reality-based guidance, and the resultant despair and loss of human potential when this is not forthcoming."

The wonder is that so many parents have come through so well--mobilizing optimism, resourcefulness and energy to deal with the day-after-day cycle of demands and all the unpredictable hurdles too. But there are others who have not survived without paying a very high price in unnecessary suffering. And we know little about the fate of those who have not survived at all.

A time for understanding--and information

Again and again, parents refer to the devastating effect of first learning that their child is actually handicapped. It can be right after the birth of a baby, or later, in the office of a diagnostician. It can be after many months--or years--of anxiety and guesswork, and rebuffs by doctors who say "don't worry . . . he'll outgrow it." Whenever or wherever it happens, it's a time when parents are terribly vulnerable. The need for support is as great as in any other profound human crisis. Surely all of us recognize other times when a generous rallying of reassurance is called for--and given. And yet in this crisis, parents repeatedly tell of the singular aloneness and even rejection with which they have had to stand the pain.

The essence of what is needed is really very simple. Parents who are feeling the shock of an awareness for which they are unprepared need to know--from all the spoken and unspoken ways that those around them communicate--that they and their child are loved human beings, with a life ahead to be lived and enjoyed.

Parents are cast adrift

Instead, far too often, parents find that by the very act of having a handicapped child, they seem to be cut off from the normal stream of things that could sustain them and restore their hope. At a time when more is required in summoning the power to adjust, less is usually forthcoming. In hospitals, parents tell of the hush or embarrassment that greets them from nurses. Or of a diagnosis pronounced in purely medical terms in language which is difficult to understand and given during a period when it is too hard to comprehend or absorb the news. Later, when parents are eager for information about what's really wrong, and what they can do, there seems to be no time for their questions to be heard, or answered. Or they hardly know what to ask and, lacking encouragement, keep their questions (and fears) to themselves.

We know of a few parent groups that have set up meetings with hospital staffs, to let nurses and doctors know how they feel about these crucial matters. Dialogues of this kind are a good idea. They can foster a new sense of responsibility for the kind of professional approach that could make a big difference in the confidence with which parents start off living with their handicapped child.

You can't say "no" to life

Life goes on after diagnosis, no matter how the initial scene was enacted. A story is told by a parent counselor who met with a group of parents of deaf children during the trying period when their youngsters were being seen for diagnosis. The time came for the medical reports to be given, and the members of the group--who had formed new ties of mutual support--decided that they wanted to hear the reports together, not in individual meetings. The news, for each one, was crushing. One strong person, a grandmother, quietly phrased words to help them all. She said simply: "Tell us what's to be done, and let's do it."

This capacity--to move from grief to the strength (and also, often, guts and drive) to do what's to be done--is at the heart of what every parent has to learn. For some, it's just a question of time. Their own inner resources are good ones, and they seem to know naturally how to adapt and manage successfully. For others, it can be a very difficult process. Obviously, not everyone is going to need the same amount of help. If the going gets too rough, parents should not hesitate to get extra counseling from a qualified mental health specialist. For most, it's probably not necessary to seek this kind of intensive support . . . but if you think it is, don't put it off.

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What is necessary is to have access to a wide range of opportunities to talk, ask questions, learn. And in the course of a parent's trek through clinics, diagnostic centers, school conferences, vocational rehabilitation offices, et cetera, he is bound to touch bases with a lot of professional people. Each and everyone is in a position to inform and influence, to make life easier or harder, entirely by his or her attitude. And each and everyone has a responsibility to respond in positive, constructive ways.

Stereotypes are destructive

Unfortunately, in too many cases, parents are still finding themselves pigeonholed by many of these professionals . . . seen as "rejecting" or "hostile" or "overdemanding." When they and their kids get put into boxes of prefabricated attitudes, parents get more and more isolated and unable to get the kind of help they need and are looking for.

We've heard the phrase: "That parent has never accepted his child's handicap" too many times. What on earth does it mean? Our own guess is that the person who says it is unable to empathize with the parent's feelings, and offer him some specific and meaningful guidance . . . either toward greater understanding of how to cope with frustrating problems, or toward services his child may desperately need.

Professionals get frustrated, too. And it's better to level with a parent and to share the anxiety of temporary helplessness than to stick a label on a parent--and by doing that, close the door to communication.

Let's work together

We don't mean that it's okay to play the game of "let's blame the professionals!" It isn't. We're talking about a change in attitude--toward greater mutual trust, toward acceptance of problems as real, and toward interaction that will lead to inevitable growth.

There are plenty of people in professional jobs who are, right now, doing all these things and more. There are nurses who know exactly how to reassure a new mother of a handicapped baby--to give her a sense of confidence and an awareness that her child will grow up to have happy experiences, to share in the joy of life. There are doctors who do listen, who let mothers and fathers know how proud they can be of their retarded son or daughter, or how much progress has been made since the last visit. There are social workers who never give up until a hyperactive child has finally been accepted in a school program that will really help--standing by the parents' side as advocates of new and better services. There are wonderful teachers who are eager to include parents as classroom partners, and who make it very clear that parents are always welcome to talk about any concerns they have--including discipline problems at home, or worries they may have about their child's relationships to other youngsters. We'd say that there are more of this breed of professional than in any other generation.

Needed: a new atmosphere of sharing

The quality of parents' encounters with professionals has a significant impact on their lives as well as the lives of their children. That doesn't mean that all professionals launch programs of counseling. What's needed, rather, is a change in the attitudes that are communicated. The person on the professional's side of the desk can create, by his or her own feelings and reactions, an atmosphere of sharing, of willingness to help find ways of handling difficult human problems.

No matter what the actual focus of a conference or series of meetings may be, a professional has the opportunity and, we believe, the obligation, to project certain attitudes. What are they? We'd be hard put to draw up a complete list, but for starters, we'd include these basic points:

> Assuring parents that there is no reason (no matter what they fear, or imagine, or what other people say) to feel guilty about their child's handicap or problem.
>
> Accepting parents' feelings--without labeling them. There's no way that anyone could deal with the unexpected blow of having a handicapped child, and the stigma that society still places on the handicapped, without feeling sad or disappointed or fearful or angry.
>
> Accepting parents. They're people--not a category called "parents of a handicapped child," and not a series of stereotyped textbook reactions to having a child with special needs. Each parent is a unique individual, with a past, present, and future all his own. If professionals approach parents this way, there'll be less judging and less fear of being judged--by both parents and professionals.
>
> Helping parents to see the positives in the future--both for themselves, and their child. Every person has a potential, a core of self to be nurtured to full flower. And every parent has a right to hope that his child will go on reaching for that potential, without being told that his limit is irrevocably inscribed in an IQ score or any other diagnostic data.
>
> Respecting the need for parents--both mothers and fathers--to value their own lives highly. They have a right to their own fulfillment--quite aside from their responsibility to home and children. They'll be better parents, too, if they know how to relax, take time off, have fun and not let the grim frustrations that are built into their situation pull them down.
>
> Recognizing, on the other hand, what a big job it is to raise a handicapped child--how much care, effort, concern, physical and emotional energy is consumed in doing it--and helping to find (and advocate) the range of programs, services and financial resources needed to make it possible for parents to do the job with dignity.

If professionals can adopt these attitudes, they can help parents move in positive directions. But parents also must have a lot of down-to-earth information--about their child's condition, his educational and therapeutic needs, and about people and programs that can fulfill these needs. They often are looking for guidance in how to manage tough family problems--what to do about discipline, tantrums, refusal to go to school, lack of friends. They need--sometimes desperately--to know where to find such things as recreation programs for teenagers and respite for themselves.

Any professional with whom a parent is in contact should be sensitive to these many needs. They don't have to know all the answers. But they can be open to the questions. And they can make it their business to know where to refer a parent who is looking for specific kinds of help. New parents, for instance, should be told about the local chapter of the parent groups concerned about their child's disability. As one parent put it: "Being with other parents keeps you going--and pulls you out of isolation." And parent groups are frequently able to fill gaps in information about the programs and services that can be life savers.

Regard each other as equal partners

These are high expectations, but no unrealistic ones. They key to change lies in a fresh look at old roles. It means seeing professionals--not as many parents have seen them in the past, on awesome and inaccessible pedestals--but as people with whom an ongoing dialogue is possible. It means that more professionals must start listening, really listening, to what parents are saying, for in this role parents are the teachers, experts on what they themselves experience, feel and need. It means facing up honestly to the haunting problems that exist everywhere. It means a genuine acknowledgement of equality between parents and professionals, without any false barrier of status. Then, we can actually join together as comrades in a common struggle, learn what's to be done, and say to each other, "Let's do it."

The book referred to in this article, The Disabled and Their Parents: A Counseling Challenge, by Leo Buscaglia, was published by Charles B. Slack, Inc., 6900 Grove Road, Thorofare, New Jersey 08086. (Cost: $8.95). We hope that public libraries will make this powerful and hopeful volume available, so that parents and professionals can benefit from its insights.

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Stop! Look! Listen!

by: Rose Landers

Parents are now, more than ever, vital members of the professional team dedicated to helping their child with special needs. Therefore, it is the responsibility of the teacher, therapist, etc., to utilize the parent's help and insights in working with the young handicapped child. Establishment of a solid rapport, in which the parents feel respected, is essential to a real working relationship between them and you. Both parents and professionals must remember that their common goal is to aid the handicapped child in the most appropriate manner. The following suggestions would facilitate a more harmonious working relationship with parents.

1. BE PREPARED - Know the main ideas which you want to stress. Review pertinent past data about the child and family. Consult with other professionals, if needed, to have details from all disciplines. Have a written summary of the conference to give to the parents as a record.

2. CHOOSE THE PROPER SETTING - A quiet area with few distractions will facilitate the best discussions. Desks and tables between you and the parents act as barriers between you.

3. FRIENDLY GREETING - Begin by greeting the parents and helping them to feel at ease. The more relaxed and informal you are the more they will be too. Don't jump into the heart of the conference without first letting them get a feel for you. During this time you should be able to gain an idea about the parents' mood. You may need to adjust your plans accordingly. Be flexible.

4. LISTEN - Before discussing the child, listen to what the parents are saying and continue to do so until they leave. Have they had a bad morning? Are there other problems at home? etc.? Also observe body language which is an invaluable guide in helping you to know where the parents are at and how they really feel. Sincere listening and genuine interest will do more than anything to insure a fruitful conference.

5. TALK THEIR LANGUAGE - This is not the time to prove that you have learned your technical vocabulary. Gear your words to the parents level of understanding to make sure they understand what you say. Professional jargon is one more useless barrier. Also consider their level of acceptance of their child's handicap.

6. ASSESS FIRST - Always begin by relating the strengths or gains of their child. Set an optimistic tone and make them feel good. Reinforce the fact that gains are a reflection of good carry over in the home. Specific examples of progress help the parents to know just what you mean.

7. DISCUSS WEAKNESSES - Lead into this part of the discussion gently. It is your job to help the parents realize the main problems and to help them prioritize them. Do not make them feel guilty for lack of progress or

regression. Be honest. Do not give false hope, but let them know that you both share the responsibility for helping the child in these areas and that you are a team. Neither one of you are in it alone!

8. PLAN TOGETHER - Share ideas that seem feasible taking into account the family schedule, living quarters, child's developmental level, etc. Involve the parents instead of dictating to them what they should do. Present several suggestions so that they may choose the best ones for them. Maintain a respect for their ideas, even if they seem inappropriate. Don't make them feel like you are in total command, but guide and direct the discussion to achieve the most practical results. Ask leading questions, not just ones that can be answered "yes or no." Discover what they really feel and want to do. What are their priority goals for their child?

9. "I DON'T KNOW" - Don't be afraid to say this. The parents will respect you for your honesty. They can see through attempted guesses for answers. Tell them that you will have to consult about the answer to the question or direct them to the person who can answer them.

10. SUMMARIZE - Bring closure to the meeting and don't let it ramble on in discussions of irrelevant subjects. Keep the parents tuned in to you and their child. Present them with the written copy of the summary and clarify points that you feel may not have been understood.

11. FRIENDLY ENDING - End on the same note of optimism that you began on. Make them want to come back and be sure they feel this has been beneficial. Re-emphasize the importance of working together as a team for the benefit of the child.

12. EVALUATE - This will help you clarify future direction. It will also enable you to conduct better conferences in the future.

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CHILDREN, WHERE ARE YOUR PARENTS?

By: Rose Landers

One of the most beneficial aspects of programs for young handicapped children is the support that parents can derive from being involved with parents with similar problems and needs. This support and sharing of experiences, fears, anxieties, etc., can be crucial in helping the whole family to adapt to their handicapped member. However, parent involvement does not just happen. It requires careful planning and evaluation. The teacher, along with various support service professionals, can be instrumental in initiating these groups. The following are some common ways to involve parents.

--Professional Organizations for Handicapped Children and their Parents - Most counties have an Association for Retarded Citizens group and their is a national (and sometimes state) group for parents of children with other problems, such as Cerebral Palsy, Spina Bifida, Autism, Deaf, Blind, etc. (Please refer to Resource Section for addresses.)

--Parent Support Groups - The success of these groups depends on the leaders, who must be aware that parents require individualized planning and programs just as their children do. Parents are individuals, so the groups must fit them, and they should not be forced to fit into a group that is not conducive to their participation. These may take the form of large group meetings with guest speakers and question and answer periods, or small group discussions designed more on the round table format. In each group parents assume the responsibility for choosing topics, speakers, etc., to insure that their is genuine interest and relevancy. Topics could include child development, nutrition, toys, stages of parental adjustment to handicapped children, legal rights as a parent and many more.

--Individual Conferences - Some parents respond best in a one to one situation. Become acquainted with the parents in order to best meet their needs. (See handout in this section).

--Workdays and Workshops at Child's Center - Parents gather to make toys, build playground equipment, clean, paint, etc. They may also learn more about toys, art and crafts, etc., in a workshop setting.

--"A Day in the Life of Your Child" - Parents go through the activities that their child does during the day to help them better understand the program and the teacher's role.

--"School Movie Night" - Similar to home movies, but the feature is video tapes of your children at school. (The teacher should have written permission to videotape the children).

--Dad's Saturday Morning Time - Fathers bring children to center on Saturday morning for group activities.

--Recreation Night - Families gather for fun and games at the school.

--Family Outings - Picnics for the "whole gang", trips to zoos, parks, local celebrations, etc.

--Parent's Dinner - Parents have a potluck meal. Babysitting at the school is arranged by teacher.

--Siblings Group - Activities planned for the brothers and sisters of the handicapped. May include group discussions of how the special child has affected them, how they help, etc.

--Fund Raising Activities - bake sales, yard sales, bazaars, car washes, toy sales, etc.

--Respite Care Program - Parents arrange a babysitting pool, where sitters are trained to care for the handicapped.

--Church Groups - Sitters may be trained to attend to handicapped children during services, or religious instruction may be organized for the handicapped.

--Volunteering to Help Teachers - Parents may aid teachers in many ways such as alleviating some of the paper work, filing, constructing bulletin boards and work sheets, making toys and games. They may also rotate being responsible for small group activity with the children, planning field trips or holiday parties, helping children when they arrive and leave or at meal times. Others may wish to act as a receptionist or tour guide for the school. This program should be carefully structured and planned before implementing.

--Daily Log between Teachers and Parents - Child carries notebook to and from school and each day the teacher and the parent jot down notes on activities that the child has participated in or other pertinent data. Routine telephone calls between teacher and parents are nice too.

--Newsletters - Information may be focused on school activities or on a parent group.

--Parent Hot Line - Parents receive calls from other parents in crisis situations.

--Support Groups for New Parents of Handicapped Infants - Parents of handicapped arrange with local hospital personnel to inform them when a handicapped child is born so that the parents may receive help and support immediately.

--Assisting Public Health Nurses or Social Workers - Parents can lend these professionals insights into the feelings of parents of the handicapped and possibly accompany them on their visits.

--Public Speakers - Parents may want to address local clubs and organizations to inform the community of the available resources.

--Notes to Congressmen - Inform the government officials how you feel about current legislation.

--Lending Libraries - Toys, games, books, equipment (homemade as well as commerical) and references for the parents.

--Behavior Management Programs - Parents work closely with professionals to carry out these programs at home.

--Programmed Packages of Materials - May include cassette tapes of activities or packets of information to help teach, play and help their child at home.

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* IDEA FOR FAMILY INVOLVEMENT

One idea being used by a preschool teacher to involve parents can be best illustrated by the following letter that was sent to each family at the beginning of the year.

Dear Parents,

This year we are going to designate a certain month to each child and his/her family. This will be the families "special" month, and during that time your family could do one or more of the following:

1. Send 5-8 snapshots of family members to school.
2. Your child could bring a favorite toy, book, etc., one or more days to be shared with the rest of the class.
3. Plan an activity for the class to do together during school time. Examples are:
    a) field trips (to your home, business, farm or an interesting site in the area.)
    b) or a presentation in the classroom by you or someone else (music, puppets, stories, etc.)
    c) or a party (birthday, holiday, etc.)

If you have a month preference, for a specific month, please let me know by Wednesday.

Thank you.

*Idea by: Beth Underbakke, preschool teacher
Abner Hendrickson School
Decorah, Iowa 52101

GUIDELINES FOR PARENTS OF HANDICAPPED CHILDREN

1. Know your child--inform yourself about the child's potentialities and problems as early as possible.

   --Have comprehensive examinations by a specialist who can coordinate the findings of other specialists and integrate all information for a thorough understanding of the child's status.

   --Require specialists to keep you informed about their findings in order that you may understand the child's potentialities and limitations and can effectively carry out your role as parents. Ask questions.

   --See that the child receives recommended medical attention.

   --Arrange for whatever special therapy is needed.

   --With professionals decide what part home training should play in the child's program and carry this out conscientiously.

2. Become informed about patterns of normal growth and development in order to have a framework within which to observe the growth, development and behavior of your child.

   --Such knowledge will make your role as parents more pleasant, help you recognize problems and find ways to cope with them.

   --Knowledge about growth and development helps prevent development of psychological problems in child and parents.

   --Accurate reports about the child's behavior helps you and specialists plan effective habilitative and educational programs.

3. Inform yourself about the broad aspects of your child's problem. Knowledge about the number of children with similar problems and about resources available for treatment and care help one see problems in better perspective. Find and use resources which can help you and your child.

   --Bottled-up problems are apt to increase in seriousness. Discussing problems often makes them seem less serious and leads to solutions.

   --Mutual understanding and cooperation between husband and wife is essential for optimal habilitation of the child.

   --Discussion of problems with other parents is often helpful with particular problems.

   --Mutual respect and honesty between specialists and parents is essential for creation of a true alliance between persons on behalf of the child.

   --Anxiety, depression, guilt, etc. if not understood and dealt with may develop into serious adjustment problems and interfere with your ability to help your child.

Compiled by: Frances Woods, Social Worker
University Hospital School
Iowa City, Iowa

A BILL OF RIGHTS FOR PARENTS

By: Sol Gordon

Parents are acutely aware of their responsibilities to provide educational, medical, emotional, and professional help for their offspring, but are seldom aware of the rights they also have as parents of a child who has a handicap and as just plain people.

FREEDOM TO:

Love and enjoy your child.

Be guilty occasionally, but only if it organizes you.

Feel that you have done the best you can.

Be depressed or have hostile thoughts once in a while without feeling guilty.

Not always feel you have to be patient.

Enjoy life as intensely as possible, even though you have a child who is handicapped.

Have interesting causes to support and to be busier than the average person, to a point where people say "How does he (or she) do it?" (If you want something done, ask a busy person.)

Let your handicapped child have his or her own private life.

Enjoy being alone at times.

Get away for at least a two-week vacation every year without the children.

Have dates, anniversaries, celebrations, weekends away, time together designed to enhance your marriage or "singlehood" - in other words, freedom for escapist moments.

Have a sense of humor without feeling guilty.

Acknowledge you are spending lots of time with your child without having it mean you love the rest of the family less.

Not devote your entire life to the "cause", but freedom to devote as much as you want or to get away for a while.

Say at times that you don't want to talk about your problem.

Let people know at other times about the progress and achievements with a genuine sense of pride.

Lie every once in a while, to say everything is fine, not feeling compelled to tell the truth to everyone who asks "How are you?"

Tell teachers and other professionals how you really feel about the job they are doing, and to demand they respect your opinions.

Tell your child that you don't like certain things he or she does regardless of the presence of a handicap.

Not praise your child gratuitously, even though you've been told to offer alot of praise.

Spend a little extra money on yourself, whether or not you can afford it.

Have your hobbies and interests without interferences--whether Majong, Mahler, or macrame.

Parents who do not enjoy almost all these freedoms are in trouble. Persons who have a handicap can only feel guilty if they sense that their parents have sacrificed themselves for them. Martyred parents are seldom appreciated by anybody, least of all their handicapped child. These freedoms must be embarked upon, especially by parents whose child has been dependent, clinging, demanding, and difficult.

PARENTS ARE PEOPLE!

THOUGHTS FOR PARENTS

ACCEPT your child as he is; be realistic about his handicap.

BUILD up his good points. Look for them and emphasize them.

CHILDREN need understanding, patience and supervision.

DOCTORS, counselors, teachers, and therapists are friends. Cooperate with them. Apply and ask for help with your problems.

ENVIRONMENT is important to any child. Habits and adjustments formed early carry lifetime influence.

FOOD, shelter, clothing and love are necessities; and the greatest of these is love.

GOOD discipline is important in your relationship with your children; make sure it is justifiable and consistent.

HELP your child when he needs it, but don't deprive him of chances to make decisions for himself.

INDEPENDENCE is gained by encouraging your child toward new experiences.

JOINT efforts of mother, father, family are needed. Work together toward the same goals.

KNOW as much as possible about your child's handicap. Talk with other parents.

LEARNING can be a rich experience for you and your child, if at his pace.

MOTHER and father groups exist. Join one because sharing can benefit you.

NEVER waste time and energy bemoaning the handicap. Accept the positive approach by looking toward alternatives to limiting conditions.

OPTIMISM can be gained. Work at it. Share it. It's contagious.

PHYSICAL handicaps are only one part of the picture. Your child learns and grows like other children.

QUALITIES of dependence can prevent your child from maturing. Encourage all his efforts at independence.

REMEMBER that your child mirrors your attitude, your personality, your reactions.

SYMPATHY leads only to a blind alley. Don't indulge yourself.

TRAINING can go on at home as well as in schools. Help is all around you. Search for it and put it to use every hour of the day.

UNDERSTANDING comes with time and patience.

VOCATIONAL guidance can be secured from counselors; start thinking about this aspect of your child's life early.

WORK is fun turned inside out.

XTRA effort is required with a handicapped child but don't neglect the rest of the family.

YOUR experience as a parent can be made richer if you avoid discouragement.

ZEAL is needed in all living. Put it in your attitude toward your child.

(From June, 1956 CRIPPLED CHILD)

Sibling Rivalry

When you think of parent involvement, why not expand this thinking to family involvement? One group that is often overlooked are the handicapped child's brothers and sisters. How are they adapting? What do they feel about having a handicapped brother or sister?

An example of how one sibling handled having a handicapped sister was the case of John. John was a third grader. His sister Susie, was 4 years old and had cerebral palsy. She was confined to a wheelchair. Every two months during the Fall and Spring, Susie would go to a residential hospital school for indepth therapy and medical treatment. She would be gone 4-6 weeks. John would get straight A's in school while she was gone. When Susie was home, his grades dropped to D's and F's. Why the dramatic variation in John's performance at school? He was trying to tell his parents through his school performance, "Hey, I want some attention, too!" or "Don't forget about me!" His way of doing this was to get his parents upset by his poor grades. As soon as the parents realized why he was doing this they began having Family Councils for all family members to talk about their feelings and ideas. They also increased the time they spent with John - going to baseball games, picnics, hiking, etc. They verbally told John they were proud of him, and gave him lots of encouragement. John's grades went back to straight A's. His parents were surprised by many of the feelings he expressed at the Family Meetings: Some Examples were:

"I get embarrassed having Susie for a sister. Sometimes kids tease me."

"Can I catch cerebral palsy from Susie? Will my legs stop working?"

"Will I hurt Susie if I play with her?"

"What can I tell my friends when they ask me about Susie?"

"Will I have to take care of Susie after you die?"

"If I get married someday, and have a baby, will my baby be like Susie?"

"Why do I always have to babysit for Susie?"

"What makes Susie the way she is?"

They took the time to listen and answered all of his questions honestly.

The local preschool handicapped classroom Susie attended when she was home also had several options for family involvement. There were picnics, family nights, etc. (see Children; Where Are Your Parents? Hand-out this section)

With opportunities to express his bottled up fears and questions, John began to exhibit a much more positive attitude. He felt much better about having Susie for his sister and he also felt better about himself.

Poisons in the Home

Safety is extremely important for the welfare of each young child. Electric plugs should be covered and toxic substances should be kept under lock and key. It is good to have an "emetic (such as Ipecac) on hand and a poison booklet to tell you how and where to use it. Waiting until you need it, is learning to late." (Brazelton, 1974).

A list of common poisons found in the home are:

Ammonia
Aspirin
Bleach
Cement and glue
Contraceptive pills
Deodorants
Dipilatories
Detergents
Diuretics
Drain cleaner
Fabric softener
Floor wax
Hairspray
Headache remedies
Heart medicines
Insecticides
Iodine
Kerosene
Laxatives
Lighter fluid
Metal polish
Paint
Paint thinner
Perfume
Permanent - wave solutions
Rat poison
Reducing pills
Room deodorizor
Rubbing alcohol
Rug cleaner
Shampoo
Shoe polish
Sleeping pills
Tranquilizers
Turpentine
Varnish
Vitamins
Washing soda

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Home Visits and Home Programming

Some tips for professionals making a Home Visit are:

1) Remember that you are a guest in the child's home. Manners and courtesy are important.

2) Be flexible and think in terms of options. Assess the territory to get a feel for the environment, family, lifestyle, and other factors.

3) Your recommendations should not interfere with the family lifestyle/socio-economic etc. Also, family members may be at different stages of adjustment.

4) Be an interested listener. Offer support, but do not allow parents to become dependent on you. Help them find solutions to their own problems.

5) Consider the functioning and/or understanding level of the family when talking with them.

6) Do not assume the parents understand a label. Re-emphasize the child's strengths and skills. When in doubt define what you are saying, use examples, and ask the parent to say it back to you. Avoid overwhelming the parents - give information according to their needs/questions.

7) Develop an open relationship with the parents in order that they can tell you if they agree or disagree with what you are doing. Answer all questions honestly. Develop rapport and a trust relationship with the parents.

8) Strive to involve the Dad and other siblings in the home. Ask them to help you.

9) Do not expect the parents to do what you would not do. Set an example. Use demonstration/modeling frequently.

10) Verbalize and radiate positiveness. Humor is a valuable asset when used appropriately.

11) Never take a parents hope away from them but help them to channel it into realistic perspectives.

12) If possible get parents together with other parents. They can help each other.

13) Encourage a teamness attitude - Everyone is working together for the child's benefit.

14) Foster the attitude "Let's try and keep trying."

Developed by: Project CHILD Home-based teachers, Keystone AEA

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ADDITIONAL SOURCES OF YOUR CHOICE:

BEHAVIOR MANAGEMENT

BEHAVIOR PROBLEMS

Inappropriate behaviors are the most common problems discussed by teachers and parents. Project PEECH, Champaign, Illinois, under the direction of Merle Karnes suggests a series of procedures essential to a positive approach. Each suggestion requires that the adult exercise more control than does the preceding suggestion.

ACTION STEPS:

1. Ignoring the behavior. In some instances simply ignoring an inapprorpiate behavior will decrease it's occurrence. For example, if a child threw some sand the teacher might ignore for the following reasons:
    a. The situation is at fault. The sand box is too full of sand.
    b. There are more important aspects of the situation with which to deal. A second child just got sand in his mouth and requires immediate attention.
    c. Without teacher intervention, the child demonstrates an awareness of his action. He apologizes for throwing sand and cleans it up off the floor.
    d. The teacher decides to praise another child for appropriate behavior. She tells a second child he is playing nicely in the sand and keeping it all in the sand box where it belongs.

2. Positive correction: Attempt to redirect the child by telling him what behavior is expected. For example, "If you throw the sand, it may go into someone's eyes. Let's leave it in the sand box, and I'll show you how to build a sand castle."

3. Physical direction and choice: If positive correction is ineffective, verbally direct the child--"Put the sand in the box"--and physically help him to follow-through. Immediately initiate a cause-and-effect situation: "The sand you throw might go in someone's eyes and that would hurt him. You must not throw sand. If you do it again you may not play with the sand anymore today."

4. Follow-through: If the child repeats the inappropriate behavior he must face the consequences. He has made his choice and the teacher must keep her word. "Get out of the sand box. You threw sand and so you may not play with it anymore." (In a classroom situation, remove the materials.)

5. Removal from the immediate situation: If the child still refuses to cooperate, remove him from the immediate situation. In the hypothetical situation, the child would be permitted to play in any area of the playground away from the sand box. (In the classroom, push the child's chair away from the table or have him move away from the group.

6. Time-out: On occasion none of the above procedures will eliminate the undesirable behavior. This is often the case when a child has a tantrum and cannot attend to the teacher's directions. When this occurs the child should be moved to a quiet environment where he can be by himself.

This procedure is not intended to punish the child for his misbehavior; it is utilized to provide the child with an opportunity to calm himself. It is time away from an environment which stimulated conflict. (The preschooler in our example would be removed from the playground; a child in a classroom would be removed from the room.) The preschooler should be taken to a small room, free of distracting objects. There he can act out without disturbing or hurting others or damaging property.

The child should be told why he is being timed-out and how to end the session: "I cannot understand you and you can't hear me when you cry and scream. When you're quiet you may go out to the playground again." Or, "I cannot let you throw sand at another child. You must sit here until you're ready to play with the other children. Then you may go outside again." Note that, in the latter instance, the child's choices are time-out or rejoining the group. Playing in the sand is not a choice; that alternative was eliminated in step #3. The teacher must be consistent.

The child should not be physically restrained during time-out unless absolutely necessary. He should never be left unattended, locked in a room, or in complete darkness. The object of this procedure is not to frighten the child into submission anymore than it is to offer him a pleasant alternative situation. The teacher should not unnecessarily speak to or have physical contact with the child during time-out.

As indicated above, the teacher can begin with positive correction and then, if needed, utilize a more restraining technique. Or, if she has had repeated experiences with a particular child and a specific behavior problem, the teacher may begin with a procedure which has been effective in the past. Whatever the situation, the teacher must USE THE LEAST RESTRAINING PROCEDURE necessary to communicate with the child and end the inappropriate behavior(s). For example, an adult should not physically move a child through a procedure if positive correction would be equally effective. The time-out procedure is only used as a last resort. The rationale for employing minimal teacher-control should be obvious: the goal of discipline is to help the child develop self-control; excessive adult-control makes reaching that goal an impossibility.

Throughout the course of behavior change, the consequences the child meets are a result of his decisions. Discipline is indeed a positive, systematic tool for helping the child develop and exercise self-control.

*The discipline suggestions above may not work for every teacher who uses them. The teacher must exercise sound judgement, consistency, sensitivity, and flexibility in dealing with behavior problems.

LOOK AT ME, TEACHER! LISTEN TO ME!

By: Hazel Turk

Does the teacher really listen to her children? Not only their verbal language, but what they are trying to say by the behavior they exhibit. In your Language Development Circle Time, you will see the disruptive behavior, the interrupter, the shy child, the aggressor and those who will attend. These behaviors are relating that child's needs. Sometimes the teacher may get maneuvered into dealing with the negative attention-getting child and his classmates may decide that this is how to get attention. Disruptive behavior needs to be dealt with and cannot be allowed to continue. But "behind each behavior is a child's need" and that is where we must start.

Every child needs attention, a chance to speak, to be listened to, and a right to their feelings. Positive attitudes are learned from positive experiences. How does the child feel about himself? Attitudes such as "I can't", "I won't", "I hate you", are acting-out behaviors and teachers are sometimes ready to call in a consultant. However, why not start to change these attitudes by getting all children to verbalize and communicate their feelings. You become the listener! Use empathy, some examples are: "I know how you feel, sometimes I get angry, too." or "I know you feel sad when you hit." or "Why do you suppose you did it?" or "Of course you can do it; let's try together."

In a circle time with children all around you, have them share experiences that made them happy. "How do you feel when you get new shoes, pet a kitty or eat ice cream?" Don't comment or evaluate their feelings, just listen to children talking to each other. Don't preach or moralize as they may shut off the communication. Getting children to talk out their feelings will help them to have an awareness of their environment, to have a better self-concept and to have positive personal interrelationships.

We believe that attitudes and behaviors are learned and children who feel good about themselves can achieve. You may be the person to convince them that they are okay, and to set a positive direction for them for the rest of their lives. If a child learns inner control now, living with people will be easier and more dignified, as they grow and develop.

When a problem arises in your room, never meet it head on. By grabbing a child or yelling at him you have lowered yourself to his level. You have met his frustration with your impatience. You are the adult so take some of the blame. "I'm sorry that you feel so bad. Let's sit here for a moment until you feel better." Keep the disruptive child near you, not on the edge of the rug. Touch him, and when he is attending, say "I like the way you are sitting" or "good boy" or "good listening." By using this approach in teaching attitudes you will help children to:

1. improve their self-concepts,
2. increase their respect for each other through a mutual sharing of feelings,
3. understand that all people have some of the same feelings,
4. realize that they can be themselves,
5. become more responsible for their behavior,
6. learn to listen to others,
7. become more tolerant toward others and their emotions, and feelings.

CHILD NEED AND WILL ACCEPT LIMITS

Discipline consists of a set of rules of behavior and respect for the rights of others. It is learned best from teachers trying to live what they want to teach. Children cannot be taught merely by correcting their actions. They learn to imitate your values about living. If there is good atmosphere and discipline in your room, you do not need punishment. At the end of the day make an evaluation or assessment of yourself and your behavior.

Did I really enjoy teaching today?

Did I listen to a child?

B

* ALIVE AND WELL IN THE CLASSROOM: BEHAVIOR MANAGEMENT IDEAS

"Gosh, you teach handicapped children. You certainly must have patience!" People have been known to make this remark to preschool handicapped teachers. They assume that anyone working with handicapped children must be endowed with a sort of "mystical gift syndrome" and that they surely must have "magic pills" or a "magic wand" to work with these youngsters. The reality is that teachers are people and they have their "good and bad" days just like anyone else. However, the difference between an effective and an ineffective teacher is directly related to how she utilizes behavior management strategies in the classroom. A positive approach to children facilitates a positive learning environment, which leads to positive children. This type of attitude develops as each child has opportunities to express himself/herself, as the child gains self or inner control, and as the child learns to respect himself, peers and property. The teacher must establish a classroom environment which is conducive to this development. Paramount in this process is the teacher's RESPECT for each child, as she helps each child to like and feel good about himself for who he is. Since there are no "miracle tools" to help children manage and control their behaviors in appropriate, socially acceptable ways, it would be of value to review some of the common characteristics that can lead to positive learning environments for children.

1. Belief in the value of each child. A competent teacher will have a strong conviction in the worth of each child. She can listen to and share feeling in an honest, sincere manner. She can also say "I'm sorry" when she has made a mistake. She doesn't expect children to be "perfect", just as she is not perfect. The teacher capitalizes on the positive, and not the negative.

2. Thorough planning of each school day. Each activity is looked at with each child's needs in mind. The activity is paced and geared to insure that the child will experience success. Activities are adapted or broken down into smaller steps depending on student needs. An effective teacher will look at each activity with the following sequence in mind:

a. assess--she knows what each child can and cannot do. Thus, she will establish realistic expectations for each child
b. goals/objectives--are designed for each child's benefit. She should not do for a child what he can do for himself.
c. implementation/strategies--the teacher has the activity thoroughly planned and well-organized. She paces the lesson appropriately for maximum attending behavior and learning: The materials and the classroom environment are stimulating, but not distracting.
d. evaluate--How well did each child perform? What changes need to be made? Where should you go from here?

3. Active participation by each child. A teaching approach that involves the children and employs the use of many senses (multi-sensory approach) helps to increase student interest level and attending behavior. A Chinese proverb states? "When I hear I forget; when I see I remember; when I do, I learn." The message is clear--involve the children and you are likely to decrease inappropriate behaviors.

4. Positive attitudes are learned from positive experiences. There is nothing earth shaking in this statement. The teacher needs to "catch the child being good" and offer appropriate encouragement and genuine praise. The teacher is the model. If the teacher yells across the room to a child to stop yelling, she is saying, "You can't yell, but I can." This is an inconsistent model and sends confusing messages to the child. The teacher should not set "double standards." A positive, consistent teacher model is a potent antidote to behavior problems in the classroom. Humor and enthusiasm are vital characteristics for a positive teacher.

5. Every action of a child has a purpose (Dreikurs). The teacher needs to listen and observe in order to better understand the feelings and needs of each child. The competent teacher will look at each child as an individual. She will look for the causes behind the behavior. For example: If you have a non-verbal, physically handicapped child in your classroom who is usually very cooperative, what would you do if he cried all morning? You would need to be a "detective" in assimilating information on probable causes of his behavior. Is the child ill, has an earache, fever, glasses pinching one ear, shoe brace too tight, abscessed tooth, gas pains etc. What is the child trying to tell you through his actions? Take time to find out!

6. Use of communication effectively. The positive teacher will vary the rate, vocabulary and the amount of communication according to each child's ability level. In doing so, she enhances the child's understanding and comprehension levels. A calm voice that gives consistent, clear, and specific information facilitates a positive learning environment. Instead of saying to the child "Don't run," why not say, "please walk." The skilled teacher would speak to the child as she would speak to a friend with the same respect.

7. Only relevant limits are established for the child. If a teacher has too many rules she ends up simply "policing" and not teaching. Constant schedules add a dimension of structure to the room and help the children feel secure. Other limits are set to maintain safety, protect health, guard the rights and property of others, and to promote self or inner control in the child.

8. The teacher does a self-evaluation of her teaching. Does the teacher listen and observe children? How is she promoting good carryover of behavior techniques into each child's home? Does she feel good about what she is doing? Does she do an "attitude tune-up" regularly? (See Attitude Tune-Up Section) Is she managing the child's behavior or is the child managing her behavior?

BAD HABITS ARE HARD TO BREAK. WHY NOT HELP THE CHILD DEVELOP GOOD BEHAVIOR HABITS EARLY?

References:

Dreikurs, R. and Goldman, M. The ABC's of Guiding the Child. (Hand-out. 10 pp.)
Karnes, M. The Importance of Discipline in Promoting the Growth of Disadvantaged Children. Champaign, Ill. Project PEECH.: (Hand-Out 4 pp.)
Turk, Hazel. Behavior Management in the Classroom. (Hand-out - 2 pp. 10/77).

*These ideas are also applicable to the child's home environment, too.

BEHAVIOR MANAGEMENT: READING GUIDE

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Patterson, Gerald R. Families. Research Press, Champaign, IL, 1971.

Patterson, Gerald R. and Gullion, M. Elizabeth. Living with Children: New Methods for Parents and Teachers. Research Press, Champaign, IL, 1968.

Watson, Luke S. Child Behavior Modification: A Manual for Teachers, Nurses, and Parents. Pergamon Press, Inc., NY, 1973.

White, Earl E. and Smith, Hazel I. A Guide to Behavior Modification: A Classroom Teacher's Handbook. Peek Publications, Palo Alto, Cal., 1975.

ADDITIONAL SOURCES OF YOUR CHOICE:

CURRICULUM AREAS

- communication skills
- motor skills
- cognitive skills
- self-care skills
- social skills

Curriculum

Introduction

Curriculum may be defined as the ideas, activities, and materials used in teaching children. Zimmerman and Calovini (1971) have suggested that . . . "it is the sum total of experiences to which a child is exposed." Curriculum is an integral part of the entire teaching process and must be competently administered in order to be effective with children. (See Are you an Effective Teacher? in the Evaluation Materials section).

It is readily discernible that there is overlap from one curriculum area to another. Piaget maintains that affective, social and cognitive components are interrelated. Thus, ideas represented under a curriculum area have components in them that apply to other areas. In this resource guide, the purpose is not to represent or imply that one curriculum approach is better than another one. No one curriculum has been discovered to be more effective than another. (See Weikart's study, 1978, in Overview of History and Research in E.C. - Special Education in the Research section). This resource guide does attempt to share some curriculum ideas, upon which you may expand, or add to for your instructional needs.

For this resource guide curriculum is divided up in the following manner:

- Communication Skills - Receptive and expressive communication, language development, songs, fingerplays and poems.
- Motor Skills - Sensory, gross motor, fine motor, art and cooking.
- Cognitive - Perception, readiness and academics.
- Self Care - Feeding, dressing-undressing, toileting and grooming.
- Social - Play, social skills, self-image, and integration. (Integration is included because often the child is in a regular program for social and adaptive behavior development).

To develop and implement a successful curriculum the parents, teacher, aide and support services, such as, preschool consultant, physical therapist, occupational therapist, speech therapist, audiologist, social worker, psychologist, nurse, etc., must work as a team to plan the best program for each and every child.

References: Early Years and Teacher magazines. (Several teaching ideas came from them).

Frantz, Stephanie. Parent-Child Newsletters (Hand-outs)

Goodwin, M.T. Creative Food Experiences For Children. Washington, D.C.: Center for Science in the Public Interest, 1974.

Higgins, Barbara Whaley. (Hand-outs from her personal file).

References: Munsen, Kay. Science is Eating Ames, Iowa: Iowa State University, Cooperative Extension Services.

Turk, Hazel. (Hand-outs and ideas from her personal file).

Water, Sand, and Mud as Play Materials Washington, D.C.: National Association for the Education of Young Children, 1959.

Wright, Laurel. Try Us You'll Like Us: A Collection of Good Snacks, Iowa City: University of Iowa (booklet).

Zimmerman, Lyndall D. and Calovini, G., Toys as Learning Materials for Preschool Children In Exceptional Children, May, 1971. pp.642-654.

Other References are listed in the reading guide section of each curriculum area.

*CONSIDERATIONS WHEN PLANNING A PRESCHOOL HANDICAPPED CLASSROOM

1. CLASSROOM
   --Where will it be located?
   --Does it contain adequate space? (recommended: 400-700 feet 20 x 20, or 20 x 30)
   --Are there architectural barriers? Can they be removed or altered?
   --Are toilet facilities located in or near the classroom?

2. TEACHER CERTIFICATION
   --Does the teacher have the appropriate credentials for teaching preschool handicapped children? (See in Misc. Section)
   --Has a teacher's aide been hired? Have his/her duties been outlined?

3. EDUCATIONAL MATERIALS/CURRICULUM BOOKS/REFERENCES
   --Have the appropriate materials been ordered for the classroom?
   --Have books and resources on teaching techniques, checklists, curriculum ideas, etc. been ordered? (See Reading Guide under each curriculum area. Also see Evaluation Materials Section)

4. ELIGIBILITY
   The following steps should have taken place before a child is a candidate for the preschool classroom:
   1. Parent signed referral (Due Process Rights Available)
   2. Parent permission for assessment signed
   3. Testing/Evaluations conducted on the child
   4. Diagnostic and Educational Staffing, with parents and Team. Out of the findings and needs, came a recommendation for the preschool handicapped classroom based on testing child's needs and parent input.
   5. Due process administered to parents at D & E
   6. Placement papers signed by parents

5. FAMILY INVOLVEMENT/COMMUNICATION
   --Have techniques been developed which will involve the parents?
   --How will communication/family involvement be facilitated on an ongoing, regular basis?
   --Will the parents receive:
      a) school calendar
      b) letter telling them (1) when school begins (2) what supplies they will need to provide (i.e. diapers, blanket, extra changes of clothes, etc.) (3) procedures for lunch and snacks (cost, etc.) and (4) school hours and days, etc.

6. WEEKLY SCHEDULE
   --Have the attendance days for each week been determined?
   --Has the amount of time in the classroom been determined?
   --Will the teacher be involved in at least 20 hours of instructional time per week? [Rules of Special Education, Citation 12.19(7)]

7. GOALS FOR THE PROGRAM
   --Have general goals been established for the preschool classroom?
   --Has a tentative daily schedule been established and shared with the parents?

8. REGISTRATION
 --Have school procedures been outlined that must be accomplished before a child enters the program?
 Examples are: immunizations up to date
 physical exam
 social history on file
 photo release
 registration card
 Some of the registration procedures will vary from one school district to another.

9. SNACKS/LUNCH
 --Will the children be provided with snacks?
 --Will the children eat lunch at school? Costs?

10. SCHOOL STAFF/COMMUNITY EDUCATION
 --Has the school staff received an inservice on all that is involved in a preschool handicapped program?
 --Has publicity gone out to let the community know that a program is started?
 --Will this new program be discussed at Parent-Teacher Meetings and community meetings to help inform the public about the new preschool handicapped classroom?
 --Have the other students in the school been told about the class?

11. TRANSPORTATION
 --Has the method and/or methods been determined for transporting the children?
 --Do the parents know and agree with such arrangements?
 --Have all the details been worked out for transporting the children?

*These ideas might also be reviewed from time to time by classrooms already in existence.

**HAVE ALL THE PLANS BEEN DEVELOPED WITH THE NEEDS OF THE HANDICAPPED CHILD AND THE FAMILY AS THE PRIMARY FOCUS?

EARLY CHILDHOOD--HANDICAPPED EDUCATIONAL MATERIALS

The following selected companies offer a variety of teaching materials which may be beneficial to a teacher of the preschool handicapped. You may know of other material companies that offer excellent materials.

American Guidance Service
Publishers' Building
Circle Pines, MN 55014

Beckley-Cardy
1113 South 9th Street
Springfield, IL 62705

Childcraft Educational Corp.
20 Kilmer Road
Edison, NJ 08817

Community Playthings
Rifton, NY 12471

Constructive Playthings
1040 East 85th St.
Kansas City, MO 64131

Playtime Equipment Co.
808 Howard St.
Omaha, NE 68102

Educational Activities, Inc.
P.O. Box 392
Freeport, NY 11520

Environments, Inc.
Beaufort Industrial Park
P.O. Box Drawer V
Burton, SC 29902

DLM
7440 Natchez Ave.
Niles, IL 60648

St. Paul's Book and Stationery
1233 West County Road "E"
St. Paul, MN 55112

ABC School Supply
437 Armour Circle, N.E.
Atlanta, GA 36324

Edmark Associates, Inc.
13241 Northrup Way
Bellevue, WA 98005

J.A. Preston Corp.
71 Fifth Ave.
New York, NY 10003

Kaplan School Supply Corporation
600 Jamestown Rd.
Winston, Salem, NC 27103

H and H Enterprises Inc.
Box 1070
Lawrence, KS 66044

Fred Sammons, Inc.
Box 32
Brookfield, IL 60513

Bowmar Pub. Co.
4563 Colorado Blvd.
Los Angeles, CA 90039

Latta School Supply
2218 Main St.
Cedar Falls, IA 50613

CONSIDERATIONS IN CHOOSING PRESCHOOL HANDICAPPED MATERIALS

Quality educational materials are an imperative part of a preschool handicapped classroom. In choosing classroom materials, you may want to consider these points:

1. Try to choose materials which are sturdy and will last over a period of time.
2. Try to choose materials which will best meet the needs of the children.
3. It is good to seek input from a variety of people (speech clinician, physical therapist, consultant, parents, etc.)
4. You may want to ask the parents what their child's favorite toys are at home.
5. Since teachers vary in their approach and teaching philosophies, it is important to get their input and involvement in ordering materials.
6. It is often a good practice to allocate $10-15 per month to the classroom for snacks, nutrition lessons.
7. Some needed teaching materials may be purchased at local toy and department stores much cheaper than in some catalogs.

*SELECTING MATERIALS WHICH MEET STUDENT NEEDS

The explosion of knowledge, developing instructional technology and legislation mandating equal education for all children is significantly changing the role of today's educator. Teachers are becoming less dispensers of content knowledge and more managers of materials and systems created by technicians and specialists. Skills in the area of materials selection and utilization must be mastered if teachers are to get the most for their material dollar and the desired learner results.

HAVE YOU CONSIDERED THE FOLLOWING IDEAS BEFORE PURCHASING MATERIALS?

1. CONTENT/SCOPE

Does the material cover the student objective? How? Is it designed to instruct? To provide drill and practice? To test? Are all components to meet the objective included? Are they adaptable to the varying needs of the children?

2. PREREQUISITE SKILLS

What skills, abilities, knowledge or understanding must the learner have in order to use the material successfully?

3. INSTRUCTIONAL LEVEL/INTEREST LEVEL

Is the interest level and level of difficulty appropriate? Don't trust the publisher's judgement on this. A label such as "For use with severely and profoundly handicapped students" may be added as a marketing technique.

4. SENSORY MODALITY (INPUT, RECEPTION)

Provision should be made for the learning style of the student. Does the student learn best through auditory, visual, tactile/kinesthetic or a combination of modes? Does the format of the material correspond?

5. CHILD RESPONSE

Is the response required appropriate to the learner's abilities and the teaching situation? (Responses may include speaking, writing, manipulating, gesturing.)

6. PRESENTATION OF INFORMATION

Does the material motivate? Require participation? Reinforce the learner with knowledge of results? Provide enough practice? Break information into small steps? Is it organized in sequential steps? Can learners proceed at their own rate? Does the material challenge the learner while allowing for success?

7. TEACHER CONSIDERATIONS

Is a teachers guide provided? How much preparation time is involved? How much class time is needed to use the material? Is inservice needed for proper utilization of the material? Does the material fit into the budget? Is validation information provided?

8. COST/VALUE

What is the price (in terms of money and time invested) per unit of results?

Inherent in the preceding list is the assumption that these material characteristics will be matched with learner characteristics. It is the ultimate responsibility of the classroom teacher to examine materials carefully, to try things out, to be a discriminate buyer, to put demands on publishers for what he/she needs, and to be willing to put the necessary effort into utilizing the materials properly to bring about the desired student change.

BE A CAUTIOUS CONSUMER

References: Iowa News - Severely/Profoundly Handicapped. Des Moines: Iowa State Dept. of Public Instruction, Special Education Division, November, 1978.

* from Article by: Gail Sullivan Fleig, Selecting Materials Which Meet Student Needs.

C

SELECTED PRESCHOOL HANDICAPPED EDUCATIONAL MATERIALS/TOYS

The following list contains educational materials that are commonly seen in most preschool handicapped classrooms. They have been carefully chosen for their adaptability to a variety of children's needs, as well as, for their universal appeal to preschool children. It is hoped that this list will serve as a guide to people who are starting a new center-based preschool program, or those looking to update materials in their present program.

MOTOR/SOCIAL/COMMUNICATION SKILLS	SUGGESTED QUANTITY
Fisher-Price Radio	1-2
Dolls	2-3
Doll Baby Bottles	2-3
Kitchen Set (wood is the most durable)	1 set
Small Play Suitcase	1
Play Table and two chairs	1 set
Wooden Blocks (30-40 pieces)	1 set
Toy Telephones	2
Puppets	3-4
Fisher-Price Record Player	1
Fisher-Price Medical Kit	1
Fisher-Price Bus	1
Barnyard Voices (animal sound cans)	1 set
Playskool Mailbox	1
Tinker Toys	1 set
Housecleaning Set	1 set
Play Dishes (metal or durable plastic)	1 setting for four
Play Pots and Pans (metal or durable plastic)	1 set
Baby Buggy	1
Mattel See N'Say	1-2
Wagon	1
Jack In The Box	1
Child Height Mirror	1
Busy Box	1
Plastic Slinkys	2-3
Play Dough (preferably the soft kind-- Homemade is the best)	12-14 jars
Fisher-Price Family House; School; Garage; or Hospital	1 of the 4 listed sets
Fisher-Price Farm	1
Bristle Blocks (1 container)	
Riding Toys or Trikes	2-3
Vehicles: cars, trucks, tractors, boats, airplanes	4-5 of any of these
Pull Toys (Molly Moo Cow, Turtle, etc.)	2-3
Mirrors: (small, unbreakable)	2-3
Pop Beads	1 set
Baby Bed	1
Cobbler's Bench	1
Play House (can be ordered commercially or made from refrigerator cardboard box and painted)	1
Rubber Balls	2-3

MOTOR/SOCIAL/COMMUNICATION SKILLS	SUGGESTED QUANTITY
Nerf Balls	2-3
Beanbags (could be made by volunteer)	10-12
Tumbling Mat	1
Tunnel	1

MOTOR/READINESS/PRE-ACADEMICS/COMMUNICATION	SUGGESTED QUANTITY
Jumbo Lotto Game	1
Milton Bradley Pick-Pairs Game	1
Milton Bradley Memory Card Game	1
Zoo Animals (plastic or rubber)	1 set
Farm Animals (plastic or rubber)	1 set
Fruits and Vegetables (plastic)	1 set
Flannelboard	1
Flannelboard cutouts and stories	several
Candyland Game	1
Milton Bradley Fruits and Vegetables Poster Cards	1 box
Milton Bradley Sort-A-Card Game	1
Playskool puzzle match-ups	
--animals and homes	1
--colors and things	1
--counting	1
--go togethers	1
Formboard (either 5 or 8 pieces)	1-2
Stencils	1 box
Other Preschool Games (such as simple matching games and lotto--can order from catalog or local stores)	3-4
Magnetic Board	1
Magnetic letters and numbers	1 set of ea.
DLM Motor expressive and association picture cards	1 of each card set
Dressing Frames	1 set
Large Sorting Box and accessories	1
Milton Bradley Picture Card Games (7302 & 7579)	1 of ea.
1-10 Number puzzles (PS698)	1
Lacing Cards	1 box
Large Old Maid Cards	1-2 sets
Go Fish Card Games	1-2 sets
Puzzles (4-18 pieces)	10-14 puzzles
(Sesame St. and Disney Characters are quite popular)	2-3 large knobbed puzzles
Colored Cubes (1")	1 container (100 cubes)
Jumbo Wood Beads (1")	1 container
Nesting Boxes (often called graduated boxes)	2-3
Stacking Rings	1-2
Pegboard and Pegs	
--small holes	2-3
--large holes	2-3
--jumbo size	1-2

MUSIC/LIBRARY/AUDIO-VISUAL EQUIPMENT	SUGGESTED QUANTITY
Rhythm Band	1 set
Records/Cassettes	6-8
Wrist Bells	8-10
Cassette Stories	6-8
Preschool Books/Story Books	15-25
Blank Cassette Tapes	4-5
Xylophones	1-2
Record Player	1
Earphones for Record Player (optional)	4-6 pairs
Cassette Tape Recorder	1
ACCESS TO: Screen, Film Projector, Slide Projector Duplicating Machine to Run off pictures of animals, shapes, etc.	

SCIENCE	SUGGESTED QUANTITY
Magnifying Glass	1
Large Magnet	1
Small magnets	3-4
Pots	8-10 so children can grow plants
Live Plants	2-3 in Classroom
Live Pets (if allowed depending on school policy)	goldfish, hamster

COOKING/NUTRITION	SUGGESTED QUANTITY
Cookie Cutters	4-6
Spoons	12-15
Funnels	2-3
Rubber Spatula	1-2
Small plastic Bowls	12-15
Mixing Bowls (different sizes)	3-4
Small Pitchers (for pouring, may use handled measuring cups)	2-3
Plastic Cups (for juice, etc.)	8-10
Measuring spoons	1 set
Egg Beaters	2
Toaster Oven	1
Strainer	1-2
Large Mixing Spoons	2
Hot Pads	2-4
Measuring Cups with handles	2-3
Dixie Cups (sm.) and paper plates (also used for art)	100 each
Can Opener	1
Cake Pans	1-2
Egg Timer	1

***It is hoped that $10-15 per month could be allocated for nutrition (an excellent multi-sensory activity)

ART	SUGGESTED QUANTITY
Colored Chalk	3-4 boxes
Butcher Paper	1 large roll
Tempera Paint (red, yellow, blue)	1 quart jars of ea. of common colors
Glitter	1-2 sm. bottles
Fingerpaint (red, yellow, blue)	2 quart jars of ea. of common colors
Pipe Cleaners (mixed colors)	5-6 packets
Manila Drawing Paper (12X18)	1 ream
Colored Construction Paper (12X18)	4 pkgs. of assorted colors
Primary Pencils	3 dozen
Scissors	1/2 dozen blunt pt. 1 pr. training - right 1 pr. training - left 2 pr. DLM easy grip scissors
Paint Smocks	8-10
Fingerpaint Paper	1 pkg. (100 sheets)
Water Color Paint Sets	9-10
Large Primary Paint Brushes	8-9
Crayons	1 doz.
School Glue (8 oz. bottles)	1 doz.

FURNITURE	SUGGESTED QUANTITY
Adjustable Height Tables	2
Kidney-Shaped Table	1
Teacher's Desk and Chair	1 set
Wastebaskets	2
Hideaway Cabinet without Trays (low shelves so children can get toys)	1 set
Security Cabinet (for storage)	1
Tote Tray Cabinet	1
Paper Cabinet (for paper and also can be used as a changing table)	1
Desk File Cabinet	1

MISCELLANEOUS ITEMS	SUGGESTED QUANTITY
Flashlight (for visual tracking)	1-2
Stop Watch (if needed)	1
Calendar for Teacher	1
Rubber Bands	1 box
Stapler	1
Staples	1 box
Paper Punch	1
All-Purpose Scissors	1
String	1 roll
Clipboards	2-3
Yarn	2-3 colors
White Chalk	1 box
Chalkboard Erasers	2

MISCELLANEOUS ITEMS	SUGGESTED QUANTITY
(It is hoped that the chalkboard and bulletin boards can be at the child's eye level)	
Masking Tape	12-14 rolls
Clear Contact Paper	6-8 rolls
Colored Poster Board	3-4 colors, 10 sheets ea.
Sponges	8-10
Paper Clips	1 box
Pens and Pencils for Teacher	6-8 of ea.
Yellow notebook paper	4-6 pads
Spray Disinfectant	4-5 cans
Tissue paper for covering changing table	1 roll
Paper towels, toilet tissue, soap	upon need for bathroom area
Mobiles	several
Watercolor Markers (8 color set)	4 sets
Stenographer's Notebook (For writing daily messages to parents and parents send messages to teacher. Child carries the notebook back and forth)	10-12
Trays (with low sides so children can do water play, corn play, etc.)	3-4
One extra wastebasket (to be lined with plastic garbage bags and changed daily. Can put used disposal diapers in it)	1
Paper towels (as needed)	
Plastic Dish Pans (for storage or water play)	3-4
Kleenex tissues	Upon need
Broom and Dustpan	1 of ea.
Pencil Sharpener	1
Rubber Mat (to put boots on in the winter)	1
Colored Contact Paper	2-4 rolls
Thumb Tacks	1 box
Bulletin Board Pictures (can be homemade or purchased)	several sets
Gummed Stars/Seasonal Stickers	8-10 of ea.
Potty Chairs	2

**Mats or Cots for Nap Time will be needed for each child.

**If children are going to be transported by bus or van, each child will possibly need a safety vest. The vest is worn over the child's coat and has rings which can attach to the seat to serve as a safety devise. Vests cost approximately $20.00 each. Please Contact: Frommelt Industries 319-556-2020
465 Huff St., Dubuque, IA 52001 Contact Person: Dick Frommelt

**Most preschool classrooms have either a section or even 1/2 of the room carpeted. This is a viable consideration in planning.

OTHER ITEMS THAT CAN BE OBTAINED FROM PARENTS/VOLUNTEERS/OTHER SCHOOL STAFF

Beach Ball
Pinwheels
Large Empty Box (to play in)
Cloth Scraps
Spools
Cupcake Tins (used for sorting objects, matching)
Wood Scraps (for art)
Balloons (used with adult supervision)
Leggs Eggs
Bibs (as needed)
Sponges
Feely Box, covered with tactile materials
Old Stump with hammer and nails for pounding
Wash cloths (as needed)
Stuffed Animals
Comb/Brush (for each child)
Drinking Cup (ea. family supplies one for child and washed out ea. day after use)
One set of extra clothes for ea. child (supplied by parents)
Toothbrush for ea. child for daily brushing at school
Bubble Soap
Dress Up Hats (i.e. farm hats, etc.)
Dress Up Clothes/Purses/Hats
Newspaper
Margarine Containers
Corks
Shoe Boxes
Baskin-Robbin Ice Cream Containers
Oatmeal Boxes
Hand Lotion
After Shave
Pictures from Magazines
Scrapbooks with common pictures
Perfume
Juice Cans
Egg Cartons
Carpet Squares (some teachers like to have children sit on a square on the floor for group time)
Clothespins
Coffee Cans
Empty Boxes/Containers to supply kitchen set for play
Sand
Corn
Shaving Cream (for sensory units and fingerpainting in it)
Disposable Diapers (supplied by parents)
Blankets for Nap Time and for the play area

OPTIONAL MATERIALS THAT ARE SOMETIMES FOUND IN PRESCHOOL

Parachute
Ironing board and play iron
Various kinds of climbing equipment
Teeter boat
Child's rocking chair
Wagon (with high sides)
Adult rocking chair (often valuable for comforting upset children)
Child slide
Rocking horse
Balance beam
Toy cash register
Lego Blocks
Activity hoops
Large Traffic Signs/Symbols
Extra cars and trucks
Water play/sand table
Popcorn popper (if appropriate)
Wooden rocky boat
Scooter boards
Jungle gym
Giant tinker toys
Easel
Language master
Camera (Be sure to have written permission for pictures of children)

ADAPTED EQUIPMENT AS RECOMMENDED BY PHYSICAL THERAPIST/OCCUPATONAL THERAPIST/SPEECH THERAPIST

THIS LIST WILL VARY ACCORDING TO THE SPECIFIC NEEDS OF THE CHILDREN. PLEASE CHECK WITH P.T.-O.T.-S.T.
EXAMPLES MIGHT BE: rolls, mats, eating equipment, chairs, horseshoe cushions, Dycem (non-slip material) carpeted fiber barrel, etc.

SELECTED INSTRUCTIONAL KITS

Kits are a major expense to the preschool handicapped classroom budget. Decisions on whether to purchase kits should be weighed in light of priorities for material acquisition, budget limitations and the needs of the children.

Peabody Early Experiences Kit - a self contained kit of lessons and materials to promote the cognitive, affective, and oral language development of prekindergarten children. (Mental Age - advanced two year olds, avg. 3 year olds and less mature four year olds and those who need practice with standard English)

Peabody Language Development Kit Level #P - a self contained kit of lessons and materials to stimulate oral language and intellectual development (Mental Age 3-5)

My Friends and Me Kit - a program to promote the personal and social development of young children. (Preschool)

Complete Kits or parts of the above kits may be ordered from:

American Guidance Service
Publishers Building
Circle Pines, MN 55014

GOAL: Mathematical Concepts Kit - a sequential, developmental series of lessons designed to offer opportunities for initial mathematical discoveries.

GOAL: Level I Language Development Kit - a comprehensive program designed to help children acquire the language skills basic to learning to read.

Available from: Latta School Supply
2218 Main St.
Cedar Falls, IA 50613

Learning Language Activities at Home by Karnes (Kit)
Council for Exceptional Children, 1920 Association Drive, Reston, Virginia.

Visual Perception Big Box - Contains a variety of items for visual perception training.

Body and Self-Awareness Big Box - Contains a variety of items to help students develop positive self-concepts, and to express feelings and reactions to people and things encountered in their daily lives.

May be ordered from: Developmental Learning Materials
7440 Natchez Avenue
Niles, IL 60648

Available From: Boehm Concepts Resource Guide and Kit. Kit for developing language skills in children. Address: The Psychological Corporation, 7555 Caldwell Ave., Chicago, IL 60648

References:

Keystone Area Education Agency Preschool Classrooms. A survey was done of the classrooms by Bill Landers, Preschool Consultant in Spring, 1979 to formulate a list of common materials/items. Thank you is extended to all preschool handicapped teachers in Keystone Area Education Agency.

Minimum Requirements for Instructional Equipment and Materials for Establishing Preschool Classrooms for Handicapped Children. Virginia Flower Child Development and Rehabilitation Center, Sedalia, MS., 1977.

Starting a Pre-School Program . . On a Shoestring. St. Paul, MN: Outreach Program - Early Education for Developmentally Delayed Children, Special Education Instructional Materials Center, St. Paul Public Schools, 1978.

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*PRESCHOOL HANDICAPPED TEACHERS WORKING IN AEA #1

This information was compiled in the Spring, 1979 through a form filled out by the preschool teachers. The information has been summarized below:

PARENT INVOLVEMENT/PARTICIPATION

--Home teaching program helping parents teach their children
--Regular contacts through meetings or calls to families
--Daily communication through notebook sent between home and school
--Periodic field trips and classroom parties
--Parent group meetings
--Visiting with parents at P.T.A.
--I.E.P. conferences with parents
--Six week parent education program of various topics concerning parents and preschoolers (discipline, speech and language, play, behavior, etc.)
--Some parental participation in the classroom
--Having parents come to school and make homemade games/materials for use with the children at home

FAVORITE TEACHING MATERIALS/RESOURCES

--Peabody Early Experiences Kit (PEEK)
--Boehm Resource Guide for Basic Concepts
--GOAL - Math Kit (by Merle Karnes)
--Children's favorite toys (for home programming)
--Puppets/Stuffed Animals/Wind Up Toys
--Bolsters/Rolls - for positioning
--Story books (appropriate to children)
--Common preschool toys
--Little trikes, plastic rocker
--The Signed English Dictionary (Gallaudet Press, Washington, D.C.)
--Project MEMPHIS - Lesson Plans for Enhancing Developmental Progress in Preschool Exceptional Children
--Performance Objectives for Preschool Children by Schirmer
--Houghton - Mifflin - Picture Key Cards
--An Activities Handbook for Teachers of Young Children (Croft/Hess)
--Monmouth Skills (Fredericks/Baldwin)
--My Friends and Me Kit
--Various D.L.M. materials
--Teaching Your Down's Syndrome Infant (Hanson)
--The Baby Exercise Book (Levy)
--Teach Your Baby (Painter)
--Total Baby Development (Koch)
--Mothers Can Help (El Paso Rehab. Center)
--Prespeech and Language Programming (Morris)
--Handling the Young Cerebral Palsied Child at Home (Finnie)
--Marshalltown Curriculum Books
--Portage Curriculum Cards
--Teacher made materials
--Other Teachers with "neat" ideas

ASSESSMENT MATERIALS/CHECKLISTS

--Portage Checklist
--Marshalltown Behavioral Developmental Profile
--Alpern-Boll Developmental Profile

- --Down's Syndrome Profile (Seattle, Washington: Model Preschool Center)
- --VORT Behavioral Characteristics Program
- --Popovich Behavioral Checklist
- --Developmental Pinpoints from Haring and Brown, Teaching the Severely Handicapped. Vol. 1 NY: Grune and Stratton
- --Carolina Developmental Profile
- --Boehm Test of Basic Concepts
- --Bangs Checklist
- --Dubuque Developmental Preschool Checklist (developed by Dubuque preschool handicapped teachers)
- --MEMPHIS checklist
- --Developmental Programming for Infants and Young Children, University of Michigan, Ann Arbor (0-3 year olds)
- --Preschool Profile (University of Washington, Seattle)
- --Meyer Checklist
- --Teacher made tests
- --Observation

SOME OVERALL GOALS FOR THE CHILDREN

- --Develop positive self-images and attitudes
- --Language stimulation/help the child to communicate more effectively (with input from Speech Clinician)
- --Improve attending behaviors
- --Improve self-help skills (input from Therapists)
- --Movement exploration
- --Tactile stimulation (with input from Therapists)
- --Maintaining eye contact
- --Improve eye pointing
- --Match objects
- --To help child develop appropriate social behavior/play skills
- --To develop readiness for academics
- --Improve fine motor skills and large motor skills
- --Improve self-expression skills
- --Child will participate successful learning experiences
- --To help parents understand the needs of their child
- --To create successful activities ongoing from home and school
- --To help parents feel important and needed by the child

*Thank you is extended to all preschool teachers for their cooperation in filling out the survey and willingness to share their ideas.

People are People!

It doesn't matter whether you teach handicapped or non-handicapped preschool people . . . . all have basic needs--only the techniques and methods used to meet them may vary.

ALL CHILDREN

1. Adapt the environment or situation so that each child can be part of the activities enjoyed by others in the group.
2. Be a good language model.
3. Care for him rather than always taking care of him.
4. Encourage the child to verbalize his needs rather than anticipating them. In a situation where there is some problem in relation to another child, help him use a verbal rather than physical approach.
5. Encourage free physical movement.
6. Expect the standards of courtesy and waiting expected of others. A handicap is not to be used to take advantage of the rights of others.
7. Give him opportunities to help others. He is so often on the receiving end.
8. Help the child develop and use any auditory ability he may have.
9. Listen! Give him time to talk by waiting for his response and try not to answer for him.
10. Repeat but vary the situation to keep the child interested.
11. Respect the contribution and opinion of each child.
12. Show him what is expected before asking him to do it.
13. Talk about what is going on to help him not only look but to see.
14. Use concrete experiences.
15. Use multi-sensory approach.
16. Use many kniesthetic experiences and sensory art activities to encourage manual dexterity and manipulation.
17. Work for communication and praise child for each success, remembering that receptive language always precedes expressive language.
18. Work with parents and therapists. Parents are the prime educators of their children.

PHYSICALLY HANDICAPPED

1. If all the others are on the floor or grass for an activity, get him out of the wheelchair and down with the others.
2. Give him the time to do whatever he is physically capable of doing for himself.
3. These children particularly need to use their bodies.
4. If he is unable to go to things, bring them to him.
5. Take advantage of the fact that classroom situations can reinforce patterns learned in therapy.

DEAF CHILDREN

1. Let him see. Closing off his vision is like putting earmuffs on a child who is blind.
2. Use simple sentences rather than single words to facilitate language development.
3. Encourage the child to express himself in some language medium such as 1) speech, 2) finger spelling, or 3) written.
4. If he has a hearing aid, he is to use it.

5. In presenting new vocabulary, remember the importance of repetition. Try to use the new word in every sentence so the chid will recognize it on your lips and associate the word with the object or action.
6. He only understands what he can see.
7. Never take anything for granted when speaking to the deaf child. Take the time to explain everything no matter how simple it may seem by asking the child to repeat what was said, by asking him a question about what was said or by having him show what was done.
8. Use simple pictures to clarify ideas when the concrete object is not available. Until he has developed a mental clue, he needs to see the visual clue. Use all possible media including: charts, blackboard, picture flash cards with labels, auditory stimulation, hearing aids--group and individual.
9. Sense of touch helps to round out what he sees.
10. Bombard him with language on his level. Use the same name for an object until he understands it. Call a dog a dog. Interchanging dog, doggie, pup, puppy, Spot, etc., adds confusion.

BLIND CHILDREN

1. Tell him what is going on. When you touch him, tell him who you are. Teach other children to identify themselves when touching him.
2. Let him make as many movements as possible by himself. Tell him to come to your voice. Let him open doors with his own effort, when possible.
3. Thoughtfully arrange the environment for free movement with safety. Encourage independence.
4. Hearing is his main channel for learning. Don't be afraid of a sensory overload on this channel for the blind.
5. Listen and refuse a request if you need to but do not ignore by not responding.
6. Many of their concepts are built and clarified by what they hear. Tell him where and why he is going bfore moving him. Talk about the type of flooring they are crossing such as "Now you are on the grass (cement, asphalt, tile, wooden floor)."
7. "Puppy is only a word until experience of its warm, tail-wiggling tail-wagging, cold nose and wet tongue add meaning.
8. Sense of touch helps to round out what he hears.

From: Engel, Rose C. Language Motivating Experiences for Young Children. Educative Toys and Supplies, 6416 Van Nuys Blvd., Van Nuys, Cal., 1972. pp.10-11.

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What Do Preschool Activities Accomplish?

1. Play with floor blocks and accessories.
   ...Development of muscular coordination.
   ...Construction experience involving number size, weight, balance, design.
   ...Dramatic and individual and social play reproducing real-life situation on a small scale.
   ...Emotional satisfactions through the use of fantasy.

2. Play with toys.
   ...Coordination of eye-hand.
   ...Fine-muscle coordination.
   ...Play involving use of series of objects into abstract design.
   ...Reprodcutions of real-life situations on a small scale.
   ...Arrangements of objects into abstract design.
   ...Emotional satisfaction through use of fantasy.
   ...Individual and partner play in social situation.
   ...Relaxing and absorbing play while seated.

3. Library activities.
   ...Restful activity while seated.
   ...Individual experience in social situation.
   ...Correct use and care of books.
   ...Awareness of public library services.
   ...Imaginative thought above percepts suggested by pictures.
   ...Interest in natural and social science subjects.
   ...Introduction to consistently good art in color, design, illustration.
   ...Awareness that printing progresses always from left to right.

4. Playhouse activities.
   ...Dramatic social play reproducing real-life situations on child-sized scale.
   ...Emotional satisfactions through use of fantasy.
   ...Identification with adult and child roles through spontaneous play.
   ...Awareness of factors related to subjects (home, family).

5. Play with dough.
   ...Coordination of hand muscles in using small tools and objects.
   ...Dramatic reproduction of adult activity.
   ...Relaxing play in social situation.

6. Play with dress-up clothes and costumes.
   ...Child-initiated dramatic play of adult, child, and fantasy roles.
   ...Reproduction of real-life situations with child-sized props.
   ...Emotional satisfactions through the use of fantasy.
   ...Identification with adult roles related to occupation and interests.
   ...Group play involving communications of ideas in words.

7. Science table.
   ...Free investigation and handling of natural science material.
   ...Acquisition of vocabulary related to names and qualities of materials (gained during group discussion when teacher introduces materials).
   ...Firsthand acquaintance with details and nature of plants, small creatures, inanimate material.
   ...Manipulation of adult instruments of investigation (magnifying glass, thermometer, scales, etc.).

(Continued on next page)

8. Sound exploration.
   - ...Individual exploration of tone, pitch, and rhythm.
   - ...Differentiation of tone, pitch, and rhythm.
   - ...Matching tones and rhythm.
   - ...Individual and group play with combinations and effects.

9. Clay modeling.
   - ...Development of hand muscles.
   - ...Exploration of dimensional form with changeable medium.
   - ...Emotional satisfaction through use of fantasy.
   - ...Restful activity while seated.

10. Easel painting.
    - ...Self-discovery and exploration of color and large form relationships.
    - ...Coordination of hand, arm, eye, and torso muscles.
    - ...Emotional satisfaction through the use of fantasy.
    - ...Absorbing individual activity in social situation.
    - ...Finger painting.

11. Crayon drawing.
    - ...Self-discorvery and exploration of color and spontaneously produced small forms.
    - ...Coordination of hand and eye muscles through use of a small tool.
    - ...Opportunity for absorbing individual experience in a social situation.
    - ...Restful activity while seated.

12. Woodworking (minimum set-up).
    - ...Coordination of eye, hand, arm, and back muscles.
    - ...Construction involving balance and design with resistant material.
    - ...Introduction to use of adult tools and materials in permissive situation.
    - ...Reproduction on a small scale of real-life objects without pressure of patterns to copy.

13. Sand-table play.
    - ...Development of coordination in using containers to pour, sift, fill, mold.
    - ...Tactile satisfactions in molding and handling damp sand.

14. Water play (outdoor or indoor).
    - ...Development of coordination from use of various accessories with water, i.e., funnels, sponges, containers, and toys.
    - ...Experience with water properties, such as displacement, buoyancy, momentum of objects in water, absorbancy, cause and effect of wet and dry, etc.
    - ...Emotional satisfaction through fantasy.

From: Jerome Levitt (Hand-out)

communication skills

SPEECH AND LANGUAGE IN THE PRESCHOOL CHILD

Developed By: Juliann Cripe, Speech Language Pathologist
Keystone Area Education Agency

The requirements for normal speech and language:

1. Children who do not have adequate intelligence take longer to learn to talk than normal children, but not all children who are slow to talk are necessarily mentally retarded.

2. Children must have adequate hearing in order to learn to talk. Some children have hearing losses that go unrecognized for years.

3. Children must have workable physical equipment to talk: tongue, lips, jaw, roof of mouth (palate), straight teeth, good voice box (larynx), and clear nasal passage. Without these working properly, the child is unable to say sounds and words accurately.

4. A child should have the ability to concentrate long enough to store information about his environment (activities, objects, ideas, and so on). He must be able to remember and combine the events that take place from second to second in order to understand them in a meaningful way. If a child is unable to remember things because he is easily distracted or pays little attention, his ability to understand and express thoughts and ideas will be weakened.

5. A child is usually slow to talk if his health has been poor and he has had many long-term illnesses, particularly between birth and three years of age. He is left with little or no energy to investigate and understand his world, if he has such illnesses as pneumonia, asthma, ear infections, or others.

6. A child must be free from brain damage, if he is to learn to talk normally. The brain must function normally to allow a child to understand speech and language. The brain must also be able to control all of the intricate movements necessary to produce speech. Therefore, it is to be hoped he does not suffer from cerebral palsy, aphasia, and so on.

7. Adequate (or undistorted) vision is necessary so a child can see gestures, facial expressions, and how sounds are produced.

8. A child needs a good emotional environment, and a proper balance between loving care and proper discipline. Emotional environment influences your child's behavior and helps determine whether he is going to be an angel or a devil. For example, if things are always inconsistent in his world, then he too will probably have trouble being consistent.

The Developmental process of speech and language.

From Birth to One Year.

The birth cry rather than the first word is considered the beginning of speech development. All early crying is reflexive, containing vowel-like sounds which provides exercise that strengthens the lungs, tongue, lips, palate, and jaw muscles as they work together. Crying does not mean anything to him at first, but when he learns that his crying can be an alarm system to get the parent to attend to his needs, he's learned that crying is useful. He's sending messages and the parent is responding which is the central theme of learning to talk. Crying eventually changes from an involuntary, automatic, monotonous repetition of sounds to a cry that is more voluntary with variations in length, pitch and volume.

This is a very important time for the child to learn that people are enjoyable. Talking in a soothing voice helps to let him know he is secure. Hearing friendly talk helps him to associate speech and language with something pleasant and enjoyable. The use of both physical and voice gestures help the child understand what is meant even when the words accompanying the gestures aren't understood. When the child first attempts to imitate your voice or gestures, he is beginning to understand and use an expressive form of language.

At about six months, babies begin to combine sounds and repeat them over and over in a meaningless way. This repetition of syllables, like ma-ma-ma, is called babbling. Babbling is important because the child begins to listen to the sounds he says and derives pleasure from this which causes him to babble all the more. When the child's babbling is imitated by the parent, the non-English sounds are gradually eliminated from a baby's practice.

Before the child uses a meaningful word, he will understand a few frequently used words, phrases, and short sentences such as "no!", "sit down," "open your mouth." A child normally says his first meaningful word somewhere in the period between nine and eighteen months. A meaningful word should sound similar to and mean what an adult might mean if he used the same word. Don't mistake a baby's babbling of da-da, ma-ma for a meaning word. The use of meaningful words is the beginning of a baby's ability to express himself with greater accuracy. These words often will relate a familiar person, object (ball), feeling (hot), place or direction (up), or activity (bye-bye). A child has no way of knowing whether the effort exerted in learning to talk is worth the trouble unless he is encouraged.

From One to Two Years.

A one year old child often gets confused and generalizes in many instances. For example, if he has seen a puppy and has learned to say puppy, then it is very natural for him to call every animal "puppy" for a time. Because the vocabulary of a child at one year is not large, he cannot express his emotions verbally and must resort to screaming, crying, shaking his crib or having temper tantrums.

An eighteen month old child knows the names of many common objects such as a ball, spoon, cup or shoe. He can be expected to recognize and locate an eye, nose, hand, toe or ear and will usually enjoy guessing games in which he has to touch or point to them. He should be understanding more and talking more. A very common stage which children go through at about eighteen months of age is called echolalia. This is the ability of the child to copy words which they hear without really knowing their meanings. A few months later the child will try to imitate the fluency of adults before he has the necessary vocabulary and practice in putting words together. What comes out is unintelligible and is called jargon. Jargon differs from babbling because the sounds and expressions change more rapidly; there is less repetition of syllables, and he will sound as though what he is saying is very important.

An average 10 to 15 word vocabulary at eighteen months will increase to about 300 words by the age of two years. He is now beginning to put words together but can't talk like an adult because he still has a short attention span, lacks vocabulary, does not have physical coordination necessary to imitate adult speech, and has little grasp of grammar.

From Two to Three Years.

A child from age two to three will still have many sound errors, but will realize that words are sounds put together in different combinations. A two year old child's vocabulary will increase from 300 to 900 words, and his average sentence length will increase from two words to as many as five by the time he is three. For example, his sentences will have grown from one word, "Cookie", to "want a cookie," on to "Me want cookie," and finally to "Mommy, I want a cookie."

Children between the ages of two and three should learn that words are made up of sounds; that sentences are made up of words; that talking is made up of sentences, and that we talk to give and get information.

From Three to Four Years.

Children between three and four years of age have new experiences that they want to tell about without knowing how to put enough words together to express themselves smoothly. This repeating, pausing, backing up, holding on to sounds, and general confusion of "thinking and talking" is very normal. A three year old child who repeats a s-s-s-sound or syl-syl-syllable that, or a word like-like-like this, or a phrase like this - like this - like this - is not necessarily a stutterer. Because of competition within the family and because of parental pressure, it is understandable that the child's speech might be nonfluent during these years.

Three year old children may ask as many as 400 questions a day. His vocabulary will increase from approximately 900 to 1500 words and his sentence length will extend to three or four words during this year, but he will still not sound like an adult. He will begin to refer to time and number concepts such as yesterday, next week, one, or many. The way a three year old child uses plurals and the past tense is often incorrect. Often he will not have learned the exceptions to the rules and say runned instead of ran or mans instead of men.

He should also be learning words like "in", "on", "beside", "under", "above" and "below." He will begin to match colors and may even identify red and blue. Almost all of what children learn about speech and language is through adult models. Good models are very important for the child from birth on but also particularly important at this age. A good speech model would:

1. Talk with enough volume so that you can be heard easily.
2. Talk slowly enough to be understood without much effort.
3. Pronounce your words carefully and correctly.
4. Use a pleasant tone of voice.
5. Use a vocabulary the child can understand.
6. Talk with some occasional animation.
7. Use short sentences rather than long rambling ones.
8. Say things the child would consider meaningful and find useful.

From Four to Five Years.

The average four year old will use around 1,500 different words, which will increase to 2,200 at five. Even though the average five year old youngster has a vocabulary of 2,200 different words he will use them over and over and thus use anywhere from 9,000 to 13,000 words a day. He is a big talker and seems to talk almost constantly. His speech is characterized by demands and commands, but he also is likely to recall and use any slang or profanity he has ever heard. His speech should be intelligible, although he still may make some grammatical errors and misuse words. By the end of his fifth year, his grammar will be nearly correct and he will tend to criticize others for wrong usage. The normal nonfluency will continue, particularly at times of excitement. His voice will become well modulated with fewer periods of talking too loudly or too softly. It is important that he is using his best voice and not talking hoarsely, or through his nose (hypernasality) or as though he had a cold (denasality) or too high or low.

The acquisition of Phonology.

Ages by which most children have acquired speech sounds according to Sander, 1970.

Before age 2 -	h(hammer) m(man) n(no) w(wagon)	b(baby) p(pig)
age 2 -	t(top) k(cat) g(goat)	d(dog)
age 3 -	f(feet) y(yellow) s(sun)	r(ring) l(lion)
age 4 -	ch(cheese) sh(sheep) s(sun)	z(zebra) v(vase) j(jump)
ages 5 & 6-	th(thumb)	th(this)

General Guidelines for Development of Some Parts of Speech and Some Basic Concepts -

Age	Pronouns	Quality	Position	Size	Quantity
2-2 1/2	I,my,mine, me,yours		in,off		
2 1/2-3	she,her,he,	soft,heavy	on,under, out of,together,away from	big, tall	all

	Pronouns	Quality	Position	Size	Quantity
3-3 1/2	you,they	hard,same	up,top, apart, toward		empty
3 1/2-4	us,their,	light	around,in front,high, in back, next to	little	full,more, less
4-4 1/2			beside, bottom backward, forward	short, fat	each
4 1/2-5	we	different	down,low	thin	
5-5 1/2	our		behind, ahead, first, last		

Reference: Pushaw, D. etal. Teach Your Baby to Talk. NY: CEBCO Standard Pub. Co, 1975

Language Development: Ideas for Parents and Teachers

1. It is very important to talk to the child. Describing what you are doing or where you are going helps the child to develop his/her understanding vocabulary. Telling him/her about your day and about things he/she knows about are very, very important to the child's growth in language development. Adjust your vocabulary to the child's understanding level.

2. Giving the child many opportunities for exploration and looking at the world around him/her is very important. It is very beneficial if you can accompany him and tell him about things and point out objects to him.

3. Reading stories to him, looking at pictures, making a scrapbook of pictures are quite good for the child.

4. Games such as Old Maid and other matching games are very good in helping the child to perceive likes and differences.

5. Using the tape recorder, megaphone, hollow tubes (such as Pringles can with open ends), all have value in facilitating speech.

6. It is extremely important to share with the child how you feel. If you are angry then you should show it or verbalize it. If happy, sad, mad, etc. then show them. The child needs to understand nonverbal communication and be able to understand what people are saying to him/her through their faces.

7. Trips to the market, grandma's picnics, zoo, farm, etc., are all valuable in developing his/her understanding vocabulary and giving the child more experiences.

8. Dimestore toys are excellent for children in that they are easy for the child to manipulate and the child can better perceive the objects. It is good if the adult can talk and play with the child. The optimal is if both parents spend equal time talking with the child, playing with him, and making up stories about the objects.

9. All the sensory avenues should be involved in the child's daily schedule. He should have opportunities to smell, taste, feel, touch, see, and hear the world about him.

10. Going for walks, teethbrushing, face washing, bath time, dressing can all be excellent times to talk with the child about her clothes, health, colors around her, feelings, etc. The opportunities are endless. Attaching labels to objects is very valuable.

11. It is important that the child be encouraged to communicate up to his/her optimal capacity. If the child can verbally approximate a sound then he/she should be expected to do so before the need is met.

12. Singing, music, fingerplays are all great activities for developing rhythm, rhyme, motion, concepts (such as numbers and colors)

13. Talking about things that the family has done or is doing or will do in the future, will help the child in beginning to grasp an understanding of time and will also help orient him/her to new situations.

14. Expecting the child to assist in clean-up, dusting, watering the plants, picking up the room, and assuming responsibilities for the consequences of his/her behavior is very important, not only to language development, but also to self-image building.

15. One of the best activities for the child to utilize all the senses is in cooking. Automatically, almost all the senses are brought into play in this kind of activity. It may be a bit messier with the child "helping" but all in all he/she can gain many benefits from it. Especially good are sequencing--the various steps that it takes to make something. Also, if the adult talks to the child as they work together, the child will gain an understanding about making things and the names of the various objects and foods.

16. Shows such as Sesame Street and Captain Kangaroo are excellent in their educational format and will help in increasing the child's vocabulary. Mr. Rogers, too!

17. Talking about body parts and having the child point to the various parts is very good. If working with pictures, the adult may put three pictures out and ask the child to pick up one that the adult names. Then they can talk about it (colors, what is going on in the picture, etc.)

18. Finally, the key to language development is Consistency, Communication and Carryover by all who work with the child. All must work together as a team if the child is to make optimal progress at his/her own unique level of functioning. It can be very fun and exciting, but also takes a great deal of time and patience!

    Tips: (a) Get down on the child's eye level. (b) Encourage the child to verbalize, but do not pressure. (c) Take the time to stop! look! and listen! to each child (See Stop! Look! Listen! Hand-out in Behavior Management Section.)

*Please adjust the suggested ideas to the child's ability levels. Not all of the activities are appropriate for every child. Ask yourself, "Will the child experience success?" Try to choose activities which will facilitate this in each child.

Songs, Fingerplays and Poems
Introduction

Activities that use songs, fingerplays and poems are very pleasurable to young children. They primarily facilitate language development, but also cover many other curriculum areas. The adult will need to determine what areas should be emphasized in using the songs, fingerplays and poems.

Many of the ones included are universal favorites that appear in many sources. For organizational purposes they have been grouped in the following categories: (1) Easy, (2) Animals/Insects (3) People and Their Bodies, (4) Health/Safety/Food, (5) Seasons/Weather, and (6) Miscellaneous.

EASY SONGS, FINGERPLAYS AND POEMS

The Train

Choo, choo, choo. (slide hands together) The train runs down the track. (run fingers down arms) Choo, choo, choo, (slide hands together) And then it runs right back. (run fingers up arms)

Grandma

These are Grandma's glasses and this is Grandma's cap and this is the way she folds her hands and puts them in her lap. (Can do actions with it.)

I Touch

I touch my head, I touch my nose.
I touch my mouth, and then my chin.
I touch my ear, I touch my face, and then I touch my chin again.

Jack Be Nimble

Jack be nimble, Jack be quick
Jack jump over the candle stick.
(Thumb of left hand is used as candle. Index and third finger of right hand jump over it.)
Jump it lightly, Jump it quick
But don't tip over the candlestick.
(Index and third finger of right hand are made to walk backward and jump over candle.)

Little Boy Blue

Little Boy Blue, come blow your horn (imitate)
The sheep in the meadow;
The cows in the corn. (make the animal sounds)
Where is the little boy
Who looks after the sheep? (hands over eyes)
He's under the haystack fast asleep! (whisper)

Warm Kitty

Warm kitty, soft kitty, little ball of fur
Sleepy kitty, happy kitty, purr, purr, purr.

Johnny's Hammer

Johnny pounds with one hammer, one hammer, one hammer. Johnny pounds with one hammer, then he pounds with 2
(Repeat adding:)
(1 hand, 2 hands, both legs and head motion)

Jack in the Box

(Make fist, thumb tucked in and hand in upright position
Jack in the box
Sits so still
Won't you come out?
(pop out thumb as you say will)
Yes, I will!

Eye Winker

Eye Winker, (Point to eyes.)
Tom Tinker, (Point to ears.)
Nose Smeller, (Point to nose.)
Mouth Eater, (Point to mouth.)
Chin Chopper, (Tap chin.)
Chin Chopper, Chin Chopper, Chin Chopper, Chin.

Two Little Eyes

Two little eyes that open and close,
Two little ears and one little nose,
Two little cheeks, and one little chin,
Two little lips with teeth locked in.

Knock At The Door

Knock at the door, (Tap forehead.)
Peep in. (Point to eyes.)
Lift up the latch, (Tap end of nose.)
Walk in. (Open mouth; hold finger near.)
Chin chopper, Chin chopper, (Tap under chin.)
Chin Chopper, chin.

Jack and Jill

Jack and Jill went up the hill
To fetch a pail of water
Jack fell down
And broke his crown
And Jill came tumbling after.

Ring Around the Rosy

Ring around the rosy
Pocket full of posies
Ashes, Ashes
All fall down.

London Bridge

London Bridge is falling down
falling down, falling down
London Bridge is falling down
My Fair Lady.

Pop Goes the Weasel

All around the carpenter's bench
The monkey chased the weasel,
The monkey thought 'twas all in fun,
Then POP, goes the weasel.

Little Miss Muffett

Little Miss Muffett
Sat on a tuffet
Eating her curds and whey
Along came a spider
And sat down beside her
And frightened Miss Muffett away.
(Fist with thumb standing)
(Pretend to eat)
(Run fingers along floor)

Eensy Weensy Spider

The eensy, weensy spider crawled up
the water spout
Down came the rain and washed the
spider out
Out came the sun and dried up all the
rain
And the eensy, weensy spider crawled
up the spout again (can add actions).

Teddy Bear

I had a little teddy bear
His name was Tim,
I put him in the bathtub
To see if he could swim.

He drank up all the water
He ate up all the soap,
I took him to the doctor
The doctor said, "No hope."

The Teapot

I'm a little teapot, short and stout
This is my handle,
(Put one hand on hip)
This is my spout.
(Extend opposite arm sideways, hand
out)
When I get all steamed up, then I
shout.
Just tip me over and pour me out.
(Bend body toward extended arm)
I'm a very clever pot, it is true.
Here's an example of what I can do.
I can change my handle and change my
spout.
(Change position of hands)
Just tip me over and pour me out.
(Bend body in opposite direction)

Here Is The Church

Here is the church,
(Put backs of hands together, palms
down.)
Here is the steeple.
(Clasp fingers; extend index fingers
to make a point.)
Open the door,
(Turn hands around, fingers still
clasped.)
And see all the people.
(Wiggle fingers.)

Five Fingers

Five fingers on this hand,
(Hold up one hand.)
Five fingers on that;
(Hold up other hand.)
A dear little nose,
(Point to nose.)
A mouth like a rose,
(Point to mouth.)
Two cheeks so tiny and fat.
(Point to each cheek.)
Two eyes, two ears,
(Point to each.)
And ten little toes;
(Point to toes.)
That's the way the baby grows.

Twinkle, Twinkle

Twinkle, twinkle, little star
How I wonder what you are.
Up above the world so high
Like a diamond in the sky.
Twinkle, twinkle, little star
How I wonder what you are.

One, Two Buckle My Shoe

One, two buckle my shoe; three, four shut the door; five, six pick up sticks; seven, eight lay them straight; nine, ten big fat hen.

Pat-A-Cake

Pat-a-cake, Pat-a-cake, baker's man, bake me a cake as fast as you can. Pat it and prick it and mark it with a B and put it in the oven for Baby and Me.

Tea Party

Here's a cup
and here's a cup
and here's a pot of tea.
Pour a cup
and pour a cup
and have a drink with me.

Row, Row, Row Your Boat

Row, row, row your boat
Gently down the stream.
Merrily, merrily, merrily, merrily,
Life is but a dream.
(move arms in a circular motion at sides throughout song.)

Mary's Lamb

Mary had a little lamb
Its fleece was white as snow
And everywhere that Mary went
The lamb was sure to go.

Hush-A-Bye, Baby

Hush-a-bye, baby, In the tree top, When the wind blows, The cradle will rock, When the bough bends, The cradle will fall, Down will come baby, cradle and all.
(Interlock fingers, palms up, make peak of two forefingers and two little fingers.)

Baby's Bath

Baby's ready for his bath
Here's the baby's tub.
Here's the baby's washcloth,
See how he can rub!
Here's the baby's cake of soap,
And here's the towel dry,
And here's the baby's cradle,
Rock-a-baby-bye.
(Make circle with arms.)
(Hold hand up, palm flat.)
(Pretend to rub face.)
(Make a fist.)
(Hold hands flat, thumbs touching,)
(Make imaginary cradle and rock it back and forth.)

Here is a Chimney

(make fist, thumb tucked in and hand in an upright position as a chimney)
Here is a chimney,
Here is the top, (other hand on top of first)
Take off the lid (remove hand)
Out smoke pops! (pop out thumb)

Tall and Small

Now I'm very tall
(stretch arms high)
Now I'm very small
(double up with arms clasping knees)
Guess which I am now?

Hot Cross Buns

Hot cross buns! Hot cross buns!
One a penny, two a penny, Hot cross buns!

Humpty Dumpty

Humpty Dumpty sat on a wall;
Humpty Dumpty had a great fall;
All the King's horses
And all the King's men
Couldn't put Humpty together again.

Teddy Bear

Fuzzy, Wuzzy was a bear
Fuzzy, Wuzzy had no hair.
Fuzzy, Wuzzy wasn't fuzzy, was he?

The Ball

A little Ball, A bigger Ball, A great big ball I see, Now let's count the the balls 1--2--3.

Ten Little Indians

(Good song for counting practice)
One little, two little three little Indians,
Four little, five little, six little Indians,
Seven little, eight little, nine little Indians,
Ten little Indian boys.
Can also be: One little--helper, worker, etc.

FEE, FIE, FOE, FUM

Fee, fie, foe, fum,
(point to little finger for "fee,", etc.)
See my finger,
(point to finger before thumb.)
See my thumb.
(point to thumb.)
Fee, fie, foe, fum,
(point to fingers.)
Finger's gone,
(hide finger in hand.)
So is thumb.
(hide thumb.)

Once I Saw a Little Bird

Once, I saw a little bird
Go hop, hop, hop.
(Make hopping motion with fingers)
And I cried, "Little Bird,
Will you stop, stop, stop?"
I was going to the window
To say How-do-you-do,
But he shook his little tail,
And far away he flew.
(Move fingers as if flying)

Hickory, Dickory, Dock

Hickory, dickory, dock,
The mouse ran up the clock.
The clock struck one,
The mouse ran down,
Hickory, dickory, dock.

There Was A Little Mouse

Open the child's hand and make circles in her palm while you say the words to the rhyme:
"There was a little mouse,
And he had a little house,
And he lived -
Up -
Here!"
At "Here!" travel your hand up the child's arm and tickle her under the chin.

This Little Pig

(Use fingers or toes)
This little pig went to market
(wiggle thumb)
This little pig stayed home.
(wiggle pointer)
This little pig had roast beef
(wiggle middle)
This little pig had none.
(wiggle ring finger)
This little pig cried wee-wee
(wiggle pinky)
All the way home.
(run pinky on lap)

Animals/Insects

The Elephant

An elephant goes like this and that.
(pat knees)
He's terribly big,
(hands up high)
He's terribly fat.
(hands out wide)
He has no fingers,
(wriggle fingers)
And he has no toes
(wave feet and wriggle toes and point)
But oh, my goodness! . . . what a
nose!!!
(Hands up to face in surprise and arms
crossed in front of nose to make a
trunk)

Little Ducky Duddle

Little ducky duddle went wading in a puddle, went wading in a puddle quite small. Said he, "It doesn't matter how much I splash and splatter; I'm only a little ducky after all."

Bees

Here is the little beehive, (fist)
Where are the bees?
Hidden away where nobody sees.
Soon they come creeping out of the
hive.
One, two, three, four, five. (fingers
come up one at a time)

The Rabbit

My little rabbit goes hippity hop
His two little ears go flippety flop
See how he runs on his little tip
toes.
See how he wiggles his pink nose.

Two Little Blackbirds

Two little blackbirds sitting on a
hill. (close fists; extend index
fingers)
One named Jack and the other named
Jill.
Fly away Jack; fly away Jill; (hide
hands behind back, separately).
Come back Jack and come back Jill
(bring hands back separately with
index fingers extended).

Lonely Kitten

I'm just a lonely little kitten,
As lonely as can be;
Won't somebody come
And be a friend to me?
(Make fist of left hand, thumb for
head, and little finger for tail.)
(Right hand moves toward left with
walking motion of index and middle
fingers. When they meet, enclose
fists in right hand.)

The Frog

Baa-loomp went the little green frog
one day.
Baa-loomp went the little green frog
Baa-loomp went the little green frog
one day
And his eyes went blah, blah, blah.

The Baby Bumblebee

I'm bringing home a baby bumblebee. Won't my mommy be so proud of me. (Put hands together) I'm bringing home a baby bumblebee---Oooooo! He stung me! I'm smashing up my baby bumblebee. Won't my mommy be so proud of me. (rub hands together) I'm smashing up my baby bumblebee---Oooooo! It's sticky! I'm licking up my baby bumblebee. Won't my mommy be so proud of me. (bring hands down face and pretend to lick) I'm licking up my baby bumblebee---Oooooo! I'm sick! I'm throwing up my baby bumblebee. Won't my mommy be so proud of me. (pretend to throw up) I'm throwing up my baby bumblebee---Oooooo! it's all over! (pretend to throw up) I'm wiping up my baby bumblebee. Won't my mommy be so proud of me. (pretend to wipe) I'm wiping up my baby bumblebee---Oooooo! It's all wet! I'm wringing out my baby bumblebee. Won't my mommy be so proud of me. (pretend to wring out cloth) I'm wringing out my baby bumblebee---Whew! It's all GONE!!!!

Bear Hunt

This is a simulated bear hunt. Have the child pat his knees (walking) and repeat the lines after you. (could also go on a lion hunt using same lines)
Let's go on a bear hunt! O.K., let's go. Get the gun. Open the door. Go through the door. Shut the door.
O.K., let's go. Down the path.
(Walk for awhile) Oh, Look! A
1. swamp--Can't go around it. Have to go through it.
2. tree--Can't go under it. We'll have to climb up it.
3. creek--Can't go around it. We'll have to jump it.
simulate each object
Oh, Look! A cave! Let's go in it and look for bears! It's dark in here! I feel something dark and furry! Eeek, it's a bear! Run! (Do all of above in reverse order) When you are back home sigh and say, "We made it!" You can invent other obstacles, or omit some if the child has trouble following the story.

This Little Squirrel

This little squirrel said, "Let's run and play." (Point to each finger in turn.)
This little squirrel said, "Let's hunt nuts today." This little squirrel said, "Yes, nuts are good." This little squirrel said, "Yes, they're our best food." This little squirrel said, "Come climb this tree,
(Hold forearm up, hand open; run fingers of other hand to top fast, ending with thumb and forefinger making circle.)
And crack these nuts, one, two, three." (Clap hands.)

Turtle

There was a little turtle, he lived in a box, he swam in a puddle, he climbed on the rocks, he snapped at a mosquito, he snapped at a flea, he snapped at a minnow and he snapped at me. He caught the mosquito, he caught the flea, he caught the minnow, but he didn't catch me.

Pigs and Cows

Three little pigs and a little pig more knocked on the farmer's bright green door. "Be quick, Mr. Farmer, we want our lunch, lunch, lunch, lunch!"

Three little cows and a little cow more knocked on the farmer's bright green door. "Be quick, Mr. Farmer, we want our lunch too, moo, moo, moo!"

The farmer came out with a furious roar, "Who's that a-hammering at my door?" Not a bit, not a scrap will you get from me, so said he.

Those poor little animals knocked once more, quietly, quietly on the door, And said most politely on their knees, "Please--Please!"
(Hold up the right number of fingers to represent the animals and knock loudly on the floor as indicated by the words)

My Little Kitten

My little kitten ran up a tree, and sat on a limb to look at me. I said, "Come, Kitty", and down he ran, and drank all the milk, I poured in his pan.

Little Bird

Way up in the sky the little birds fly
(make flying motions)
Way down in the nest the little birds rest
(make nest by clasping hands together)
With a wing on the left
(put left hand under left upper arm)
And a wing on the right
(put right hand under right upper arm)
The little bird sleeps all through the night
(lower head as if sleeping)
Then out comes the sun
(make large ball with arms)
The moon goes away
(Lower arms)
Good morning, good morning the little birds say
(Place hands under upper arms and flap elbows)

Animals in the Barn

I am a barn with roof so high
(hold arms above head with fingers touching)
Reaching, reaching for the sky
(stand on tiptoe and reach upward)
Inside me, many animals stay.
There they sleep and eat and play.
First there's a cow with horns on her head.
(hold up index fingers at head for "horns")
Then there's a rooster with wings outspread.
(stretch out arms)
There is a horse with long strong legs,
(point to legs)
And a hen that lays white eggs.
(cup hands together to hold "eggs")
There is a pig that's big and fat.
(make a circle with arms)
And a little kitty-cat! MEOW!!

Six Little Ducks

Six little ducks that I once knew
Fat ducks, pretty ducks, there were two
Chorus:
But the one little duck with the feather on his back
He led the others with his quack, quack, quack,
Quack, quack, quack - quack, quack, quack
He led the others with his quack, quack, quack.
Down to the meadow they would go
Wiggle-waggle, wiggle-waggle to and fro
Repeat chorus
This song is accompanied by hand motions: The proper number of fingers are held up when a number is mentioned. The quack-quack-quack is accompanied by arm-flapping in time to the music.

Animals On The Farm

I went to vist a farm one day,
I saw a cow across the way, and what do you think I heard it say? MOO, MOO, MOO.
(repeat with other animals)

The Turtle

The turtle crawls on the ground
And makes a little rustling sound.
He carries his house wherever he goes
And when he's scared
He pulls in his toes and covers his head.

Monkey See, Monkey Do

When you clap, clap, clap your hands
(3 claps)
The monkey clap, clap, claps his hands.
(3 claps)
Monkey see, monkey do.
The monkey does just like you.
(Change motion for each new verse)
Example: tap, tap, tap, your head; stamp, stamp, stamp your foot; slap, slap, slap your knees; tap, tap, tap your nose.

The Butterfly

Pretty, dancing butterfly
Winging to the sky
Pretty colors in the sun
Flying up so high

Squirrel

The squirrel ran up the tree
He chattered there at me
He waved his tail at me
He scampered down the tree

Old MacDonald

Old MacDonald had a farm
E-I-E-I-O
And on that farm he had a cow
E-I-E-I-O
With a moo here, and a moo there
Here a moo, there a moo, everywhere a moo, moo
Old MacDonald had a farm
E-I-E-I-O
And on that farm he had a chick
E-I-E-I-O
With a cheep, cheep here, and a cheep, cheep there
Here a cheep, there a cheep, everywhere a cheep, cheep
(monkey, duck, horse, pig, cat, dog, lion, mouse, rooster, etc.)

Skunk

I stuck my head in a little skunk's hole
And the little skunk said, "Well, bless my soul;
Take it out, take it out, take it out, take it out, remove it!"
Well, I didn't take it out, so the little skunk said
"You better take it out or you'll wish you had."
"Take it out, take it out, take it out, take it out, remove it!"
Psst--I removed it too late. (Hold nose.)

The Bunny

Once I saw a bunny
And a green cabbage head.
I think I'll have some cabbage
The little bunny said.
So he nibbled and he nibbled
Then he perked his ears to say
Now I think its time
I should be hopping on my way.

The Fish

Little fishy in a brook
________ caught him with a hook.
________ cooked him in a pan.
________ ate him as fast as he can.
(Put children's names in blank spaces)

Three Little Robins

Three little robins were fast asleep. (Hands beside head.) Three little robins began to peep. (Move pointer finger and thumb together to form beak.) Three little robins looked for a worm. Three little robins began to squirm. (Wiggle fingers.) Along came the father with worm number one. (Hold up one finger.) The first baby swallowed it, and that was fun. Along came the father with worm number two (Two fingers.) The second baby swallowed it and he was through. Along came the father with worm number three. (Three fingers.) The third baby swallowed it as fast as could be. How did the three baby robins feel after they'd had such a wonderful meal?

The Squirrel

Whisky, Frisky, hippety, hop,
Up he goes to the tree top.

Whirly, twirly, round and round,
Down he scampers, to the ground.

Furly, curly, what a tail,
Tall as a feather, broad as a sail.

Where's his supper? In the shell.
Snappy, cracky, out it fell.
(use hands and arms to express squirrel's movements)

The Bunny

Here's a bunny with ears so funny
(close thumb and last two fingers of right hand, wiggle forefinger and middle finger as ears)
And here's his hole in the ground
(with left hand make a hole)
When a noise he hears
(stamp feet)
He pops up his ears
(make ears on right hand pop up)
And hops to his hole in the ground!
(make bunny hop into hole)

BINGO

There was a farmer who had a dog and
Bingo was his name-o.
B-I-N-G-O, B-I-N-G-O, B-I-N-G-O,
And Bingo was his name-o.

There was a farmer who had a dog and
Bingo was his name-o.
(clap)-I-N-G-O, (clap)-I-N-G-O,
(clap)-I-N-G-O,
And Bingo was his name-o.
Repeat verses omitting one letter more each time you sing.

Pigs

Two mother pigs lived in a pen. They each had four babies and that made ten. Now those four babies were black as night, and those four babies were very white. Now all eight babies loved to play, so they rolled and they rolled in the mud all day. At night with their mother's they curled in a heap and they squeaked, and they squeaked til they went to sleep.

Five Little Monkeys

Five little monkeys (show fingers)
Jumping on the bed (pat legs)
One fell off and broke his head.
(1 finger)
Mamma called the doctor
(pretend to hold phone)
And the doctor said
"No more monkeys jumping on the bed!"
(shake finger as if scolding)
Four little monkeys . . .
(repeat same as first verse)
Three little monkeys . . .
(repeat same as first verse)
Two little monkeys . . .
(repeat same as first verse)
One little monkey . . .
(repeat same as first verse)
Mamma monkey jumping on the bed
She fell off and broke her head!
So we all called the doctor
Doctor said, "That's what you get for
jumping on the bed!"
(Option: substitute children's names
for monkeys)

The Bear Went Over The Mountain

The bear went over the mountain,
(Extend forearm, close and drop fist.)
The bear went over the mountain,
(Slowly creep fingers of other hand up
over first hand to wrist.)
The bear went over the mountain,
To see what he could see.
(Hold above position.)
And what do you think he saw?
And what do you think he saw?
The other side of the mountain,
The other side of the mountain,
The other side of the mountain,
Is all that he did see!

So the bear went down the mountain,
(creep fingers down sloping forearm.)
So the bear went down the mountain,
So the bear went down the mountain,
Very hap-pi-ly.

Little Goldfish

I know a little goldfish (hands together-palms) who hasn't any toes. He just swims around and swims around (movement as swimming) and bumps his little nose. (jut forward to indicate a bump) When I say "Come on out and play" (right hand gesturing "come") he says "come on in and swim. (left hand gesturing come).

Elephants

In a spider's web one elephant was hung. He was lonely there so he called another one. (Tune: Farmer in the Dell)
(Children enter, one by one, circle taped on floor as song is sung. After all in, yell "Run away" and everyone runs from circle.)

The Ant Song

The ants go marching one by
one--Hurrah! Hurrah!
The ants go marching one by
one--Hurrah! Hurrah!
The ants go marching one by one, the
little one stops to look at the sun
And they'll all go marching down to
the ground, to get out of the rain
BOOM! BOOM! BOOM! BOOM! BOOM! BOOM!
BOOM! BOOM!
Repeat using:
two by two --- tie his shoe
three by three --- to climb a tree
four by four --- shut the door
five by five --- scratch his hide
six by six --- pick up sticks
seven by seven --- look at heaven
eight by eight --- slam the gate
nine by nine --- read the sign
ten by ten --- shout "THE END!"

Five Little Squirrels

1-2-3-4-5
5 Little squirrels sitting in a tree. Said this little squirrel "What do I see?" Said this little squirrel "I see a gun." Said this little squirrel "Oh, let's run." Said this little squirrel "I'm not afraid." Said this little squirrel "Let's sit in the shade." Bang went the gun and away they run.

Mice

I think mice are rather nice. Their tails are long, their faces small, they haven't any chins at all. Their ears are pink, their teeth are white. They run about the house at night. They nibble things they shouldn't touch and no one seems to like them much. But I think mice are nice. By Rose Fyleman

People And Their Bodies
Songs, Fingerplays and Poems

This Is The Circle That Is My Head

This is the circle that is my head,
(Make circle with both hands.)
This is my mouth with which words are said,
(Point to mouth.)
These are my eyes with which I see,
(Point to eyes.)
This is my nose that's a part of me,
(Point to nose.)
This is the hair that grows on my head,
(Point to hair)
This is my hat all pretty and red,
(Place hat on head.)
This is the feather so bright and gay,
(Touch feather on hat.)
Now I'm all ready for school today.

A Five Senses Poem

My ears help me hear
My eyes help me see
My hands help me touch
They are all a part of me.

My tongue helps me taste
My nose helps me smell
These are called the five senses
And they all serve me well.

- L.B. Scott

Where is Thumbkin

(Tune of Are you Sleeping)
Where is thumbkin? Where is thumbkin?
(Make both hands into fists and keep them behind your back)
Here I am, here I am.
(Bring one hand at a time in front of you with only thumb standing)
How are you today sir?
(Wiggle one thumb by bending it up and down a few times)
Very well I thank you.
(Wiggle your other thumb in the same way.)
Run away, run away.
(Place hands one at a time behind your back)
REPEAT each time using (1) pointer (2) middle man (3) ring man (4) pinky.

People

Big people, little people,
(Hold thumb and index fingers apart horizontally, then close together.)

Fat people, skinny people.
(Hold index fingers apart vertically; then close together.)

Grumpy people, happy people,
(Make appropriate facial expressions.)

People who are grinny.

Rushy people, slow people,
(Walk fingers of one hand up and down other arm as rhyme indicates.)

Walking up and down.

Babies in their carriages
(Move one fist slowly up and down other arm.)

Being pushed through town.

Me

My two eyes are winkers,
My one head a thinker,
My two ears are hearers,
My ten fingers are feelers,
My one nose a smeller,
My two lips are tellers,
My two feet are walkers,
My one tongue is a talker,
Winkers, thinker,
Hearers, feelers,
Smeller, tellers,
Walkers, talker
Now you see a picture of me.

Will You Come and Walk With Me?

Will you come and walk with me, walk with me, walk with me
Will you come and walk with me all a-round the room.
Will you come and bounce with me?
Shake with me? wiggle with me?
smile with me?
(sing to Mary Had a Little Lamb)

Put Your Hand on Your Shoe

(to tune (Happy and You Know It")
Put your hand on your shoe on your shoe.
Put your hand on your shoe, on your shoe.
Put your hand on your shoe,
it's an easy thing to do.
Put your hand on your shoe, on your shoe.
Put your hand on your chair, then wave it in the air.
Put your hand on your chair, on your chair. (can add other lines)

Clap Your Hands

Clap, clap, clap your hands; clap your hands with me.
Clap, clap, clap your hands; clap your hands with me.
Shake, shake, shake your hands; shake your hands with me.
Shake, shake, shake, your hands; shake your hands with me.
(sing to Row, Row, Row Your Boat tune)

Clap Your Hands

Clap your hands in time to mu-sic.
Clap your hands in time to mu-sic.
Clap your hands in time to mu-sic.
There are many things that you can do.
2. swing your arms
3. blink you eyes
4. wiggle your nose
5. wiggle like a worm
6. shake your finger
7. bounce, bounce
8. rock yourself
(sing to 10 Little Indians tune)

Clap, Clap, Clap Your Hands

Clap, clap, clap your hands,
Clap your hands together.
Clap, clap, clap your hands,
Clap your hands together.

Stamp, stamp, stamp your feet,
Stamp your feet together.
Stamp, stamp, stamp your feet,
Stamp your feet together.

Other suggestions: Shake your arms, Stretch up high, Crawl along, etc.

Who Is That Copycat?

In a mirror I can see
A copycat who plays with me.
I wrinkle my nose and he does, too.
His mouth gets round when I say "Boo!"
I waggle my tongue like this and that.
And so does he that copycat.
He has my teeth, my ears, my eyes,
And everything is just my size.
Who is this copycat I see?
That copycat I see is me. - McCord

Mr. Tall and Mr. Small

By Carlson

There once was a man
who was tall, tall, tall
He had a friend
who was small, small, small

The man who was small
would try to call
To the man who was tall
"Hello up there."

The man who was tall
At once would call
To the man who was small
"Hello down there."

Then each tipped his hat
And made this reply:
"Good-bye my friend."

"Good-bye, Good-bye."
(done with little finger and middle finger or puppets)

Fun With Hands

(to Row, Row Row Your Boat Tune)
Roll, roll, roll your hands as slowly as can be;
Roll, roll, roll your hands
Do it now with me.
Roll, roll, roll your hands as fast as can be;
Roll, roll, roll your hands
Do it now with me.
Continue substituting these phrases -
Clap, clap, clap your hands.
Shake, shake, shake your hands.
Stamp, stamp, stamp your feet. (and other phrases.)

Here I Am

(point to body parts indicated)
On my face I have a nose
And way down here I have ten toes
I have two eyes that I can blink
I have a head to help me think
Here's my chin, and very near
I have 2 ears to help me hear
I have a mouth with which I eat
And when I run I use my feet
Here are arms to hold up high
And here's a hand to wave good-bye.

Ten Little Fingers

I have ten little fingers
(Hold hands up, fingers extended)
And they belong to me.
(Point to self)
I can make them work
Would you like to see?
I can close them up tight;
(clench fists)
I can open them wide
(extend fingers)
I can put them together
(hands together in prayer fashion)
And can make them hide
(put them behind back)
I can make them go high
(extend upward)
I can put them down low
(stoop over and drop hands)
I can fold them together
(clasp hands)
And hold them just so
(place hands in lap)

Head, Shoulders

Head, shoulders, knees, and toes;
knees and toes.
Head, shoulders, knees, and toes;
knees and toes.
Eyes, ears, mouth, and nose.
Head, shoulders, knees, and toes;
knees and toes!
(can have children do fast or slow)

Here We Go

Here we go up, up, up.
Here we come down, down, down.
Here we go forward.
Here we come backward.
Here we go round, round, round.

My Hands

My hands upon my head I place on my
shoulders, on my face, on my knees,
and at my side, then behind me they
will hide.
Then I raise them up so high swiftly
let my fingers fly. Quickly count one,
two, three, and see how quiet they can
be. (suit action to the words)

Touch Your Nose

Touch your nose,
Touch your chin,
That's the way this game begins.

Touch your eyes,
Touch, your knees,
Now pretend you're going to sneeze.
(put finger under nose)

Touch your hair,
Touch one ear,
Touch your two red lips right here.

Touch your elbows,
Where they bend,
That's the way this touch game ends.

Open, Shut Them

Open, shut them
Open, shut them
(both hands straight out open and
close)
Give a little clap.
(clap hands once)
Open, shut them
Open, shut them
Fold them in your lap.

Creep them, creep them
Creep them, creep them
(walk fingers from lap up to chin)
Right up to your chin.
Open wide your little mouth,
But do not let them in!

The More We Get Together

The more we get together, together,
together, the more we get together, the
happier we'll be.
For your friends are my friends, and my
friends are your friends. The more we
get together, the happier we'll be.

I Have Two Eyes

I have two eyes
I have two ears
I have two cheeks
I have one nose
I have one mouth
I have one head
I have ten fingers
I have ten toes.
(Point to each as you count)

My Ten Fingers

I have ten little fingers,
They all belong to me.
I can make them do things,
Would you like to see?
I can open them up wide,
Shut them up tight,
Put them together,
Put them out of sight,
Jump them up high,
Jump them down low,
Fold them quietly,
And fold them just so.

My Body

Here are my ears, and here is my nose;
Here are my fingers, and here are my toes;
Here are my eyes, both open wide;
Here is my mouth, with my tooth inside,
And my busy tongue that helps me speak,
Here is my chin, and here are my cheeks,
Here are my hands that help me play,
And my feet that run about all day.

Let Your Hands Clap

Let your hands clap, clap, clap,
(Clap hands three times.)

Let your fingers tap, tap, tap,
(Tap fingers three times.)

Fold your arms and quiet be.
(Fold arms.)

Roll your hands so wide awake,
(Roll hands.)

Let your fingers shake, shake, shake,
(Shake fingers.)

Climb the ladder, do not fall.
(Hold hands open, palms down; step one over other high above head.)

Till we reach the steeple tall.

Fold your hands and quiet be.
(Fold hands.)

Health/Safety/Food Songs, Fingerplays and Poems

Naughty Soap Song

Just when I'm ready to
Start on my ears,

That is the time that my
Soap disappears.

It jumps from my fingers and
Slithers and slides
Down to the end of the
Tub, where it hides.

And acts in a most disobedient
way;
And that's why my soap's growing
Thinner each day!

Stop! Look! Listen!

Stop, Look and Listen
Before you cross the street
Use your eyes, use your ears,
Then use your feet.

The Busy Mouse

Little mousie Monday washed all day
Little mousie Tuesday ironed they say
Little mousie Wednesday made the bed
Little mousie Thursday baked the bread
Little mousie Friday swept the house
(just like any good little mouse)
Little mousie Saturday went uptown
And bought herself a pretty Sunday
gown.

Red Light, Green Light

(Tune of Twinkle Twinkle Little Star)
Red light, red light what do you say?
I say stop and stop right away.
Yellow light, yellow light what do
you mean?
I mean wait until the light turns
green.
Green light, green light what do you
say?
I say go, but look both ways.

Now our job is to do what is right
We will obey the traffic light.

Muffin Man

Do you know the Muffin Man, the
Muffin Man, the Muffin Man.
Do you know the Muffin Man, who lives
on Drury Lane.

Yes I know the Muffin Man, the Muffin
Man, the Muffin Man.
Yes I know the Muffin Man, who lives
on Drury Lane.

One Potato, Two potatoes

One potato, two potatoes, three
potatoes, four; five potatoes, six
potatoes, seven potatoes more. Eight
potatoes, seven potatoes, six
potatoes, five; four potatoes, three
potatoes, two potatoes, My, oh my!
Hot potatoes!

A Delicious Cake

Mix the batter,
Stir the batter,
(Make motion of stirring.)
Shake some flour in.
(Make shaking motion with one hand.)
Mix the batter,
Stir the batter,
(Repeat stirring motion.)
Place it in a tin.
(Make motion of pouring into pan.)
Sprinkle little raisins on,
(with one hand make motion of
sprinkling raisins on batter.)
Pop batter in to bake.
(Make motion with both hands of
placing cake in oven.)
Open wide the oven door,
And out comes a cake!
(Bend over and make motion as if
opening oven door.)

Fun In Our Garden

It's fun to work in our garden,
It's fun to weed and hoe,
It's fun to plant the tiny seeds
It's fun to watch them grow.

Teeth

Up and down and round and round
(move forefinger up & down)
I brush my teeth to keep them sound.
To keep them sound and clean and white
(point to teeth)
I brush them morning, noon and night.

Making Cookies

(Imagine that you are making cookies, and act out the rhymes as you say it)
I am making cookie dough.
Round and round the beaters go.
Add some flour from a cup.
Stir and stir the batter up.

Roll them; cut them nice and neat;
Put them on a cookie sheet.
Bake them; count them: one, two, three.
Serve them to my friends for tea.

Grow, Little Children

(Tune: "Shine, Little Glowworm, Glimmer, Glimmer")

Grow little children, stronger, stronger;
Sleep, little children, longer, longer,
Eat fresh vegetables every day,
That will keep ill health away.
Have fresh air and plenty of water;
Exercise like children ought to.
Do these things and you will see
How healthy you will be.

Dirty Hands

Dirty hands are such a fright
(Hold up hands.)
See, I washed mine clean and right!
(washing action with hands)
Mother says it is quite right.
(point to mother)
To wash them morning, noon and night.
(washing actions with hands)

The Goops

The goops lick their fingers and the goops lick their knives. Oh, they lead disgusting lives! The goops talk while eating; and loud and fast they chew; and that is why I'm glad that I'm not a goop - - Are you?

This Little Boy

This little boy is going to bed.
(The forefinger of one hand is the little boy. The other hand open with palm up is the bed.)
Down on the pillow he puts his head.
(The thumb forms the pillow. The forefinger is placed on the thumb.)
Wraps himself in the covers tight.
And this is the way he sleeps all night.
(The fingers of the open hand are closed over the forefinger)
Morning comes, he opens his eyes.
Back with a toss the cover flies.
(The closed fingers are opened)
Up, he jumps!
He's off and away.
Ready for work and play all day.
(Lift the forefinger up. Take away forefinger)

Drink Your Milk

(Tune: Row, Row, Row Your Boat)

Drink, drink, drink your milk
Drink it every day.
Merrily, merrily, merrily, merrily
It helps you on your way.

Eat, eat, eat your meat
Eggs or beans each day.
Protein will help you grow
Each and every way.

Chew, chew, chew your fruit
And vegetables each day.
They give you lots of vitamins
To help you work and play.

Spread, spread, spread your bread
Put on it what you wish
Peanut butter, jelly too,
Make it so delicious.

Taste, taste, taste your food
At every single meal.
Then you'll have your basic four
And healthy you will feel.

Puppets

Make celery, apple, orange and milk puppets from construction paper and tongue blades. The following poems go with the puppets:

Celery

"I'm Madam Celery;
So much fun to eat;
Serve me at your snack time;
Then you'll want no sweet."

Orange

"I'm Madam Orange;
The sunshine color you see;
I protect you from illness;
Because I give you vitamin C."

Apple

"I'm Mr. Apple;
A juicy, swooshly bite;
Eat me every day;
To keep your teeth just right."

Milk

"I'm your nice, sweet milk;
I'll make bones and teeth grow strong;
Drink and drink and drink some more;
Then you'll be healthy your whole life long."

Three Little Pigs and Their Dinners

There were three little pigs so happy and gay, as each started to go his way one day. Said the first little pig, in his house of straw, "Now I can eat all the candy I want, hurrah." So he filled his tummy with candy and cake, till it began to ache and ache. "Oh, I wish I had listened to Mommy," he said, as he rolled over and over in his bed.

The second little pig in his house of twigs, said, "Now I have no Mommy to make me eat figs." So he had doughnuts, popsicles, and root beer. Soon he yelled aloud, "Oh, oh, dear! Oh, dear! my tooth is aching, my tummy's in pain. I'll never do that, no never again."

The third little pig, remembering what his Mommy said, had meat, fresh vegetables, milk, and bread. He ate oranges and apples, singing their praise, as he felt peppy and strong all of his days. "I'm always healthy, happy and strong, I get my sleep and nothing goes wrong."

Seasons/Weather Songs, Fingerplays and Poems

Fall

Apples

Way up in the apple tree (look up at pretend tree)
2 red apples smiled at me. (make 2 apples with fists and smile)
I shook that tree as hard as I could (shake tree)
And down came the apples. (fingers flutter down for falling apples)
M-m-m-m were they good.
(rub stomach)

Little Leaves

Little leaves fall gently down,
Red and yellow, orange and brown;
(Raise hands and lower them fluttering fingers like falling leaves.)
Whirling, whirling round and round,
(Repeat above motions).
Quietly without a sound;
Falling softly to the ground,
(Lower bodies gradually to floor).
Down-and down-and down-and down!

Leaves

(to the tune of London Bridge)

See the leaves falling down, falling down, falling down
See the leaves falling down, all over the ground.

The Squirrel

These are brown leaves fluttering down,
And this is the tall tree, bare and brown;
This is the squirrel with eyes so bright,
Hunting for nuts with all his might.
This is the hole, where, day by day,
Nut after nut he stores away.
When winter comes with cold and storm,
He'll sleep curled up all snug and warm.

- Oglevee

Whirling Leaves

The little leaves are whirling round, round, round,
The little leaves are whirling round, falling to the ground,
Round, round, round, round
Falling to the ground. (whisper)

Pretty Leaves Are Falling Down

(London Bridge Tune)

Pretty leaves are falling down, falling down, falling down. (Hands above head and fingers wiggling down)
Pretty leaves are falling down all around the town.
Let's rake them into a pile. (Make raking motion)

Jack-O'-Lantern

The Jack-o'-Lantern chuckled
Then winked his funny eye--
I would rather be a pumpkin face
Than be inside a pie!

Five Little Pumpkins

Five little pumpkins, sitting on a gate
(hold up 5 fingers)
First one said, "My it's getting late."
(Hold up 1st finger)
Second one said, "There are witches in the air."
(hold up 2nd finger)
Third one said, "I don't care."
(hold up 3rd finger)
Fourth one said, "Let's run, let's run."
(hold up 4th finger)
Fifth one said, "It's Halloween fun."
(hold up 5th finger)
Oooooooh went the wind
Out went the light
Those five little pumpkins
Ran fast out of sight!
(make 5 fingers run)

Jack-o-Lantern

Jack-o-lantern, Jack-o-lantern
You are such a funny sight
As you sit there in the window
Looking out at the night.

You were once a yellow pumpkin
Growing on a sturdy vine
Now you are a jack-o-lantern
See the candle light shine.

Fall

Halloween

The owl goes Hoo
The owl goes Hoo
Hi ho on Halloween the owl goes Hooo.

The ghost goes Booo
The ghost goes Booo
Hi ho on Halloween the ghost goes Booo.

(Sung to Farmer in the Dell tune--make up other verses)

My Pumpkin

See my pumpkin round and fat.
(Make circle with hands, fingers spread wide, touching)
See my pumpkin yellow.
(Make smaller, yellow)
Watch him grin on Halloween.
(Point to mouth which is grinning)
He's a very funny fellow.

Jack-O'-Lantern

I'm sometimes big,
(Make a large circle with your arms.)
And sometimes small,
(Make a small circle with your fingers.)
But always round and yellow;
(Make a medium circle with your arms.)
When children fix my famous grin,
(Show your teeth.)
Then I'm a scary fellow!
(Make a scary face.)
I'm called a jack-o'-lantern
(Point to self.)
I like to stare at you;
(Stare at a friend.)
Why don't you stare right back--
(Point to friend and then to self.)
And shout, "Hi, Mr. Boo!"
(Shout "Boo!")

- Marie Frost

Jack-O'-Lantern

I made a jack-o'-lantern
I made it yesterday
I made 2 round holes for 2 round eyes
I made his nose this way
I made his mouth into a smile
Put all his teeth in place
I lit a candle to light up his face.

Halloween Witches

Sung to the tune of "Ten Little Indians"

1 little, 2 little, 3 little witches;
(Hold up one finger for each count)
Fly over haystacks,
(fly hand in up and down motion)
Fly over ditches.
Slide down moonbeams without any hitches.
(Glide hand downward)
Heigh-ho! Halloween's here.
(Clap hands to beat of last line)

Three Little Witches

Three little witches, on Halloween night
Danced and played by pumpkin's light

One little witch sang a queer little song--
Deedle-dee doo! Ding, ding, dong!

One little witch did a dance with her broom--
1-2-3 and boom, boom, boom!

One little witch did a trick with her hat--
Tip it, tap it, out flew a bat!

Three little witches at the end of night
Swished their brooms
Out went the light!

- Watts

Mister Turkey

(London Bridge Tune)

See him strutting all around, all around, all around,
See him strutting all around, fat Mr. Turkey.
(Walk around in circle with stiff legged strut and hands behind back for tail)
Hear the gobble, gobble-gobble; gobble-gobble; gobble-gobble.
Hear the gobble, gobble-gobble, fat Mr. Turkey.

Fall

Five Little Pilgrims

Five Little Pilgrims on Thanksgiving Day
1st one "I'll have cake if I may"
2nd "I'll have turkey roasted"
3rd "I'll have chestnuts toasted"
4th "I'll have pumpkin pie
5th "Oh, cranberries I spy"
But before they ate any turkey or dressing
All of the Pilgrims said a Thanksgiving blessing.

Riddle for Thanksgiving

It walks around
With a wobble, wobble.
All it says
Is "Gobble, Gobble!"
It isn't a robin,
It isn't a crow,
What bird is it,
Do you know?
- Gouled

My Turkey

I have a little Turkey, big and fat
He spreads his tail and walks like that
His daily corn he would not miss,
And when he talks it sounds like this.
Gobble, gobble, gobble.

The Turkey

Here is a turkey with his tail spread wide.
(make a fist with one hand-thumb out for turkey's head--attach "tail by spreading out fingers of other hand and join together)
He sees the farmer coming, so he's trying to hide.
He runs across the barnyard--wobble, wobble,
(make "turkey" move forward)
Talking turkey talk---"gobble, gobble, gobble."
(move thumb up and down for gobble effect)

Five Fat Turkeys

Five fat turkeys are we
We sat all night in a tree
But when the cook came around,
We couldn't be found.
That's why we're here,
You see.

Gobbler

Turkey Gobbler
Gobble, Gobble
Eat until you
Wabble, Wabble.

Winter

First Snow

- Marie Louise Allen

Snow makes whiteness where it falls.
The bushes look like popcorn-balls.
The places where I always play
Look like somewhere else today.

Christmas Tree

Oh Christmas tree; Oh Christmas tree
How lovely are your branches.
You're always green in summer time and
still your green in winter time.
Oh Christmas tree; Oh Christmas tree,
How lovely are your branches.

Jolly Santa

Ho, ho, ho laughs jolly Santa.
Ha, ha, ha, ho, ho, ho.
My sleigh is packed, my reindeer ready
ho, ho, ho, off I go.

Snowflakes

(London Bridge)

Snowflakes whirling all around
(Wiggle fingers in a fluttery manner, moving hands as falling flakes)
All around, all around
Snowflakes whirling all around
(Spiral hands fluttering toward floor)
Until they cover all the ground.

Santa

Santa Claus is big and fat.
He wears black boots
And a bright red hat.
His nose is red
Just like a rose.
And he Ho-Ho-Ho's
From his head to his toes.

Winter

Snow Men

Five little snow men
(Hold up one hand, fingers extended.)
Standing in a row,
Each with a hat
(Join thumbs and index fingers and
place on top of head.)
And a big red bow.
(Join thumbs and index fingers
together to make bow under chin.)
Five little snow men
(Hold up one hand, fingers extended.)
Dressed for a show,
Now they are ready,
Where will they go?
Wait till the sun shines;
(Make circle with arms above head.)
Soon they will go
Down through the fields
(Bring arms down to lap.)
With the melting snow.

The Mitten Song

"Thumb in the thumb place,
Fingers all together
This is the song
We sing in mitten weather"
When it's cold
It doesn't matter whether
Mittens are wool
Or made of finest leather
This is the song
We sing in mitten weather
"Thumbs in the thumb place
Fingers all together."

Christmas Tree

Here is a Christmas tree
on the floor.
Here are some ornaments
one, two, three, four.
Here is a star on top, you see.
And here are five candy canes
Yummy as can be!

The Impatient Snow Man

I made a chubby snow man and had
alot of fun
I thought he looked so happy when I
left him in the sun.
I told him I was going, but was
coming back to play.
I guess he got impatient, because he
melted away!

Snowman

Once there was a snowman
Who stood outside my door.
(Stand)
He thought he'd like to come inside
And run around the floor.
(run in small circles)
He thought he'd like to warm himself
By the fireside red.
(rub hands)
He thought he'd like to climb upon
A big white bed.
(legs and arms up and down)
So he called to the North Wind
"Help me now, I pray."
(hands together - palms)
I'm completely frozen
(huddle arms togehter)
Standing here all day.
So the North Wind came along
And blew in the door.
(blow)
And now there's nothing left of him
But a puddle on the floor!
(point to floor)

I Am A Snowman

I am a snowman, cold and white;
I stand so still through all the night;
(Stand up tall)
With a carrot nose,
(point to nose)
And head held high,
And a lump of cold to make each eye.
(Point to eyes)
I have a muffler made of red,
And a stovepipe hat upon my head.
(Place hands on top of head)
The sun is coming out! Oh, my!
(Make circle for sun)
I think that I am going to cry:
(Start sinking to floor)
Yesterday, I was so plump and round;
Now I'm just a river on the ground.
(Sink to floor)

Snow is Part of Christmas

Snow is part of Christmas,
Soft, feathery, and white.
Snow is part of Christmas,
Falling in the night.
Santa is part of Christmas,
Bringing gifts and toys,
Santa is part of Christmas,
A friend of girls and boys.

Winter

Mister Santa

(London Bridge Tune)

See him walking all around,
all around, all around
See him walking all around
fat Mister Santa (hold tummy as walk)
Hear the ho, ho, ho, ho, ho, ho, ho, ho;
ho, ho, ho; Hear the ho, ho, ho, ho, ho;
fat Mister Santa!

Jingle Bells

Dashing through the snow
In a one-horse open sleigh,
O'er the fields we go
Laughing all the way.
Bells on Bobtail ring
Making spirits bright,
What fun it is to ride and sing
A sleighing song tonight!
Jingle bells, jingle bells,
Jingle all the way!
Oh! What fun it is to ride
In a one-horse open sleigh.
Jingle bells, jingle bells,
Jingle all the way!
Oh! What fun it is to ride
In a one-horse open sleigh!

Rudolph, The Red-Nosed Reindeer

Rudolph, the red-nosed reindeer
Had a very shiny nose,
And if you ever saw it
You would even say it glows.
All of the other reindeer
Used to laugh and call him names,
They never let poor Rudolph
Join in any reindeer games.
The one foggy Christmas eve,
Santa came to say:
"Rudolph, with your nose so bright,
Won't you guide my sleigh tonight?"
Then how the reindeer loved him
As they shouted out with glee:
"Rudolph, the red-nosed reindeer,
you'll go down in history."
(Repeat)

The Snowflakes

I watched a little snowflake come falling from the sky,
It looked at me a minute then fell right in my eye,
I watched another little snowflake come dancing from the south
It looked at me a minute, then fell right in my mouth.

From: (Deb Krueger's classroom)

Valentine Song

(Tune: Muffin Man)

Oh would you be my valentine
My valentine
My valentine
Oh would you be my valentine
And jump along with me

hop
crawl
tiptoe
walk
clap and jump
(Do the action each verse)

Five Little Valentines

One little Valentine said "I love you."
Tommy made another then there were two
Two little valentines one for me
Mary made another, then there were three
Two little valentines said "We need one more"
Johnny made another then there were four
Four little valentines one more to arrive
Susan made another then there were five
Five little valentines ready to say
"Be my valentine on this Happy Day."
(Can substitute children's names)

Winter

Five Pretty Valentines

Five pretty Valentines waiting at the store,--bought one and then there were--
Four pretty Valentines shaped like a "V",--bought one and then there were--
Three pretty Valentines said, "I love you",--bought one and then there were--
Two pretty Valentines, this was so much fun,--bought one and there was--
One pretty Valentine sitting on the shelf. I felt sorry for it, so I bought it for myself.

- Scott

Five Little Valentines

Five little valentines were having a race.
The first little valentine was frilly with lace.
The second little valentine had a funny face.
The third little valentine said, "I love you."
The fourth little valentine said, "I do, too."
The Fifth little valentine was sly as a fox.
He ran the fastest to your Valentine Box.

Shamrock Song

Five shamrocks lying on the ground
Pick one up and pass it around

Four shamrocks lying on the ground
Pick one up and pass it around

Three shamrocks lying on the ground
Pick one up and pass it around

Two shamrocks lying on the ground
Pick one up and pass it around

One shamrock lying on the ground
Pick one up and pass it around

No more shamrocks for you and me
We're as sad as we can be.

Spring

Spring

The days are getting warmer.
I know it must be spring.
I saw some pussy willows.
I heard a robin sing.

Spring

Spring is here, Birdies sing,
Spring is here, Birdies sing.
La-la-la-la-la. La-la-la-la-la.
Spring is here, Birdies sing,
Spring is here, Birdies sing,
La-la-la-la-la. La-la-la-la-la.

Easter Eggs

The Easter Eggs are prettier
Than any I have seen.
One is red and one is blue,
And one is white and green.

Pussy Willow

I have a little pussy. (Kneel on floor)
Her coat is silver gray. (Rise very slowly)
She lives down in the meadow (Put left foot down.)
Not very far away. (Stand on both feet and bend over like a rag doll.)

She'll always be a pussy. (Stand tall)
She'll never be a cat. (Head bowed)
She is a pussy willow.
Now what do you think of that? (Raise arms)

Meow, meow, meow, meow (Slowly squat)
Meow, meow, meow, meow
SCAT! (Jump up!)

Spring

Easter

Easter eggs yellow and blue.
Easter eggs for me and you.
(Point to me and you.)
Easter eggs, candy sweet.
Easter eggs, so good to eat.
(Rub tummy.)
Easter eggs, pretty and funny.
But OH! Where is the Easter Bunny?
Here he is!
(Bring out the bunny!)

Easter Rabbit

Five little Easter Rabbits sitting at the door one hopped away; then there were four.

Refrain: Hop, Hop, Hop, Hop
See how they run.
Hop, Hop, Hop, Hop
They think its great fun.

Four little Easter Rabbits sitting under a tree one hopped away; then there were three.

Refrain

Three little Easter Rabbits looking at you one hopped away then there were two.

Refrain

Two little Easter Rabbits sitting in the sun one hopped away then there was one.

Refrain

One little Easter Rabbit left all alone he hopped away then there was none.

Refrain: Hop, Hop, Hop, Hop
All gone away.
Hop, Hop, Hop, Hop
They'll come back someday.

Mother's Day

I hugged this little card real tight,
I kissed it, Mom, to-oo.
And then I packed it full of love
And sent it off to you.

Three Guesses

Mother dear, can you guess
Who it is that loves you best?
I'll give you three guesses,
1,2,3
Then, I knew you'd think of me.

Weather

Who Has Seen the Wind?

Who has seen the wind
Neither you nor I
But when the leaves hang trembling
The wind is passing by.

Who has seen the wind
Neither I nor you.
But when the tress bough down their heads
The wind is passing through.

Rain

It's raining, it's pouring
Ole man is snoring.
Bumped his head
and went to bed
And didn't get up
in the morning.

What can you do on a
rainy day in the spring
time of the year?

Rain, rain, go away
Come again another day.

The Wind

The wind blew and blew: "Whoo-oo-oo."
(Turn around and around.)
It blew the clouds across the sky.
(Run across the room.)
The little clouds began to cry.
(Slump body sadly.)
The big round sun began to shine.
(Make a big circle with arms.)
Up grew a straight and lovely vine!
(Stand tall and wiggle fingers for leaves.)

Weather

Raindrops

If all the little raindrops were lemon drops and
  gum drops
Oh, what a world this would be.

I'd stand outside with my mouth open wide
  "Ah, ah, ah, ah, ah, ah, ah, ah, ah, ah."
(Open mouth and look up, point with hand and
finger to mouth as if catching the drops.)

If all the little raindrops were lemon drops and
  gum drops,
Oh, what a world this could be.

The Rain

Pitter-patter, raindrops,
Falling from the sky;
(Wiggle fingers to imitate falling rain.)
Here is my umbrella
To keep me safe and dry!
(Hands touching high above head.)
When the rain is over,
And the sun begins to glow,
(Make large circle over head with arms.)
Little flowers start to bud,
(Cup hands together, fingers pointing up.)
And grow and grow and grow!
(Spread hands apart slowly.)

Bouncing Ball

I wish I had a great big ball
To bounce up in the sky;
I'd bounce it till it hit a cloud
That the wind was blowing by.

My ball would strike the cloud so hard
That it would burst in two,
And empty all its store of rain
On me, our house and you.

Miscellaneous Songs, Fingerplays and Poems

I Met A Little Elf Man

I met a little elf man once
Down where the lillies grow
I asked him why he was so small
And why he didn't grow.
He slightly frowned at me and with
his eyes
He looked me through and through.
"I'm just as big for me," said he "as
you are big for you."

Tractor

Big wheels in back,
(make large circle with arms)
Small wheels in front.
(make small circle with hands)
A seat on which to sit.
(put hands together down low)
I'll climb onto my tractor--
(pretend to climb)
Now watch me driving it!
(pretend to steer wheel)

Miss Polly Had A Dolly

Miss Polly had a dolly
Who was sick, sick, sick
She called to the doctor
to come quick, quick, quick.
The doctor came with his coat and his
hat
And he knocked at the door with a
rat-a-tat-tat.
He looked at the dolly and shook his
head
And said "Miss Polly, put that dolly
to bed."
He wrote on a paper pills, pills,
pills,
I'll be back in the morning with the
bills, bills, bills.

The Mailbox

The mailbox on the corner
Eats all the livelong day,
It nibbles cards and letters
In an amazing way.
I wonder how it holds so much;
If I ate pie and cake
The way that box eats letters,
I'd have a stomach ache!

Hide and Seek

There's a funny little man in a funny
little house
And right across the way,
There's another little man in another
little house
And they play hide and seek all day.
The funny little man, thru his window
peeps
Sees no one looking, then softly
creeps.
Out of his door, he comes so slow,
Looks up and down, high and low
Then back into his house he goes.
Then the other little man, thru his
window peeps,
Sees no one looking, so softly
creeps,
Out of the door, he comes so slow
Looks up and down, high and low
Then back into his house he goes.
Sometimes these little men forget to
peep
And out of their doors they softly
creep.
Look up and down and high and low
See each other and laugh ho, ho
Then back into their houses they go.

Little Flowers

Let's play we are little flowers
sleeping in a row.
(heads down on desk)
We'll raise our heads, stretch our
arms
(arms up and rise)
And nod in the breeze just so.
(swing and nod arms from side to side
over head)

Mud

Mud is very nice to feel
All squishy-squash between the toes!
I'd rather wade in wiggly mud,
Than smell a yellow rose.
Nobody else but the rosebush knows,
How nice mud feels
Between the toes!
By Boyden

Miscellaneous

Puffer Bellies

Down by the station early in the morning
See the little puffer bellies all in a row
See the station master turn the little handle
Puff, puff, toot, toot, off they go.

This Old Man

This old man, he played one.
He played nick-nack on my thumb;
With a nick-nack, paddy whack, give a dog a bone,
This old man came rolling home.

2. Two - on my shoe (tap shoe)
3. Three - on my knee (tap knee)
4. Four - on my door (tap forehead)
5. Five - on my hive (shoo bees away with hand)
6. Six - on my sticks (tap two fingers)
7. Seven - up in heaven (flying motion)
8. Eight - plate (tap top of head)
9. Nine - on my spine (tap spine)
10. Ten - once again.

The Wonder Ball

The wonder ball goes round and round
To quickly pass it you are bound.
If you're the one to hold it last
Then for you the game is past.
You are out!
(Can pass a ball around the circle)

Robot

Robot, robot, mechanical man
Clank, clank, clank he's a walking tin man.
Nothing could be more clumsy than
Robot, robot, mechanical man.
(Children can act like a robot)

Tall and Small

Now I'm very, very tall
(Stretch arms high)
Now I'm very, very small
(Double up with arms clasping knees)
Sometimes tall; sometimes small.
(Quickly)
Guess which I am now.

The Wheels on the Bus

The wheels on the bus go round and round,
Round and round, round and round,
The wheels of the bus go round and round
All through the town.
(Hold hands in front and roll one over the other)

The driver on the bus says, "move on back,
Move on back, move on back."
The driver on the bus says, "move on back"
All through the town.
(Motion people back with arm and hand)

The horn on the bus says, "beep, beep, beep,
Beep, beep, beep, beep, beep, beep.
The horn on the bus say, "beep, beep, beep"
All through the town.
(Push hand down as if blowing horn)

The people on the bus go up and down,
Up and down, up and down.
The people on the bus go up and down,
All through the town.
(Bounce up and down)

(add your own verses)

A House For Me

The carpenter's hammer
(Make fist of one hand.)
Goes tap, tap, tap;
(Pound palm of other.)
And his saw goes see, saw, see;
(Move arm in sawing motion.)
He hammers and hammers
(Alternate hammer movements.)
And saws and saws,
(Alternate saw movements.)
And builds a house for me.
(Make house outline and motion to self.)

- Oglevee

Miscellaneous

Ten In The Bed

There were 10 in the bed
And the little one said
"Roll over, roll over"
So they all rolled over and one fell
out.

There were 9 in the bed
And the little one said
"Roll over, roll over"
So they all rolled over and one fell
out.

Repeat:

There were 8 in the bed . . .
There were 7 in the bed . . .
There were 6 in the bed . . .
There were 5 in the bed . . .
There were 4 in the bed . . .
There were 3 in the bed . . .
There were 2 in the bed . . .

There was 1 in the bed
And the little one said
"Goodnight!"

(Can include actions)

In A Cabin In A Woods

In a cabin, in a woods,
Little old man by the window stood.
Saw a rabbit hopping by,
Knocking at his door.
"Help me, help me, Sir!," he cried.
"Before that farmer shoots me dead."
Come little rabbit, come with me.
Happy we will always be.

Airplane

The airplane has great big wings,
and a propeller that goes round and
sings Brrrrrrrrrrrrrrr.
It goes up, up, up, up,
and down, down, down, down.

Hey Shadow

Hey shadow, ho shadow
(clap hands in a rhythm)
Show us what you do.
(clap hands in a rhythm)

REPEAT three times then say:
"You show us what to do." (Point to a child and have him show group what to do.

The House

This is the roof of the house so good.
(Hold up hands, finger tips touching,
hands spread apart at bottom.)

These are the walls that are made of
wood.
(Extend hands parallel.)

These are the windows that let in the
light
(Make a square by extending index
fingers up, thumbs out.)

This is the door that shuts so tight.
(Make a square by extending index
fingers up, thumbs out.)

This is the chimney so straight and
tall.
(Raise index finger.)

What a good house for us, one and all!
(Extend hands in front, parallel to
each other.)

The Clock

With a tick and a tock,
And a tick and a tock,
The clock goes round all day.
It tells us when it's time to work,
And when it's time to play.
(Move arm as a pendulum, hand upraised and elbow resting in cupped other hand. Cluck tongue in time to movement.)

Inside A Rocket Ship

Inside a rocket ship
Just enough room.
Here somes the countdown
10-9-8-7-6-5-4-3-2-1-0
and ZOOOOOOOOOOOMMMMMM!!!!

I'm Bouncing

I'm bouncing, bouncing everywhere,
I bounce and bounce into the air.
I'm bouncing, bouncing like a ball.
I bounce and bounce, then down I fall.

(Bounce with knees relaxed, drop to floor on last line for story.

Miscellaneous

HAPPY

If you're happy and you know it, clap
your hands. (2 claps)
If you're happy and you know it, clap
your hands. (2 claps)
If you're happy and know it, then your
face will surely show it. (smile)
If you're happy and you know it, clap
your hands. (2 claps)

If you're sad and you know it, shed a
tear. (sniffle and wipe eyes)
If you're sad and you know it, shed a
tear. (sniffle and wipe eyes)
If you're sad and you know it, then
your face will surely show it.
(frown)
If you're said and you know it, shed a
tear. (sniffle and wipe eyes)

If you're angry and you know it, stamp
your feet. (2 stamps)

If you're tired and you know it, heave
a sigh (sigh)
(continue as in previous stanzas)

If you're happy and you know it, clap
your hands. (2 claps)

(repeat first stanza (tap your head,
blink your eyes and other lines)
(You can add other verses - an all
time favorite)

Boa Constrictor Song

I'm being swallowed by a boa
constrictor . . . (repeat line three
times)

And I don't like it very much!!
OH NO, OH NO! HE BIT OFF MY TOE!
OH GEE, OH GEE! HE'S UP TO MY KNEE!
OH FIDDLE, OH FIDDLE! HE'S UP TO MY
MIDDLE!
OH HECK, OH HECK! HE'S UP TO MY NECK!!
OH DREAD, OH DREAD! HE'S UP TO MY
(GULP!!)
(Children can act out)

Clap To The Music

Clap, clap, clap to the music
Clap, clap, clap to the music
Clap, clap, clap to the music
Clap to the music all day long.

(Slap the table, blink, tap your head,
wiggle, rock, shake, bounce)

(Children do actions--they can create
other actions)

Policeman

I'm a happy policeman, (Smile and
point to self)
Standing tall and straight. (Stand
tall)
I direct the traffic (Motion cars to
go)
And tell the cars to wait. (Hold up
hand for stop)
I help the children (Point to self and
measure height of children)
And grown-ups, too. (Measure height
of adults)
If you get in trouble, (Point to
friends)
I'll help you! (Nod)

Postman

I come from the post office, (Walk
from post office)
My mailsack on my back. (Pretend to
carry mail on back)
I go to all the houses (Pretend to go
up to a house)
Leaving letters from my pack.
(Pretend to drop letter into mailbox)
One, two, three, four. (Hold up
fingers as count)
Who are these letters for? (Pretend
to hold letters, scratch head)
One for John and one for Lou, (Pretend
to hand letters)
One for Tom and one for you! (Pretend
to hand letters to others)
---Real letters with the children's
names could be used for this, also.

Settling Down

Sometimes it may be hard for children to get settled or to attend to an activity. These songs and fingerplays can be used to help them get out their "wiggles."

Scarecrow

Scarecrow, Scarecrow, turn around,
Scarecrow, Scarecrow, jump up and down,
Scarecrow, Scarecrow, arms up high,
Scarecrow, Scarecrow, wink one eye,
Scarecrow, Scarecrow, bend your knees,
Scarecrow, Scarecrow, flop in the breeze,
Scarecrow, Scarecrow, climb into bed,
Scarecrow, Scarecrow, rest your head.

Busy Fingers

(To the tune of Mulberry Bush)
This is the way my fingers stand, fingers stand, fingers stand,
(Follow action as rhyme indicates.)
This is the way my fingers stand, so early in the morning.
This is the way they dance about, dance about, dance about,
This is the way they dance about, so early in the morning.
This is the way I fold my hands, fold my hands, fold my hands.
This is the way I fold my hands, so early in the morning.
This is the way they go to rest, go to rest, go to rest.
This is the way they go to rest, so early in the morning.
(Cup hands loosely, palms up and place in lap.)

My Eyes

Make 1 eye go wink, wink, wink
Make 2 eyes go blink, blink, blink,
Make 2 fingers stand just so
Make 10 fingers stand in a row.
Then front and back your head will rock and then your fists will knock, knock, knock, stretch and make a yawn so wide. Drop your arms down by your side. Close your eyes and let us say a quiet sound today - SHHH!

Let's Play Rag Doll

Let's play rag doll, don't make a sound. Fling your arms and your body loosely around. Fling your hands, fling your feet, let your heads go free. Be the raggedest rag doll you ever did see.

Nap Time

Hush, shh, everybody please (finger up to mouth, make shh sound)
Not a speck of noise
Tiptoe very quietly
Through the playing toys.
Hush, shh, everybody please (finger up to mouth, make shh sound)
Not a single peep
Let's drop our heads and close our eyes
(Lay head in hand and close eyes)
Pretend we're fast asleep.

Bend and Stretch

Bend and stretch, reach for the stars.
(Follow actions as described.)
There goes Jupiter, here comes Mars.
Bend and stretch, reach for the sky.
Stand on tip-e-toe, oh! So high!

Hands

Falling, Falling, Falling almost to the ground, Raise them quietly, Twirl them round and round, faster, faster, faster, faster, slower, slower, slower, slower, Fold them in Your Lap. (Do Actions)

Wiggle Game

Wiggle, wiggle here, and a wiggle, wiggle there,
Wiggle your fingers all around in the air
Wiggle your shoulders up and down
Wiggle your nose and smile like a clown!
Wiggle your legs, both left and right
Wiggle your thumb, with all it's might!
Wiggle, wiggle here, and a wiggle, wiggle there,
Now sit right down upon your chair!

"Wiggles"

I wiggle my fingers,
I wiggle my toes,
I wiggle my shoulders,
I wiggle my nose.
Now all the wiggle is out of me, and
I'm as still as I can be.

Little Charlie Chipmunk

Little Charlie Chipmunk was a talker!
Mercy me! He chattered after breakfast
and he chattered after tea! He chattered
to his father and he chattered to his
mother! He chattered to his sister and he
chattered to his brother! He chattered
till his family was almost driven wild!
Oh, little Charlie Chipmunk was a very
tiresome child! by Helen Lecron

Wiggle Worm

Do you always have to wiggle?
Do you always have to squirm
You wiggle and you jiggle
Like a regular wiggle worm.

You wiggle in your chair
and you wiggle in your bed
You wiggle with your legs
and you wiggle with your head

You wiggle with your hands
and you wiggle with your feet
You wiggle when you're playing
and you wiggle when you eat.

I guess you're made to wiggle
and I guess you're made to squirm
So I'll like the wiggle-jiggle
and I'll love my wiggle worm.

Opening Group Time

Preschool handicapped teachers usually have a 15-20 minute opening group time or language time. This may consist of:

1. greeting each child
2. practicing recognizing their names
3. Job-Chart--several children are chosen for various tasks
4. Weather/Calendar Activity
5. "News" - each child shares some ideas or experiences they have participated in
6. Going over the day's planned activities with the children
7. This may include a short lesson on colors, body parts, fruits and vegetables, etc.

It is fun to start the group with a song. Below are some songs that might be useful:

1. "Hello
Hello ____________ How are you?
How are you? How are you?
Hello ____________ How are you?
How are you this morning?

2. "Where is ______________?"
Where is ______________? (Child's name)
Where is ______________?
Here I am. Here I am. School bells
are ringing. Ding, dong, ding;
Ding, dong, ding! (To tune of Are
You Sleeping Brother John?)

(Fill in blank with child's first name. Children can pretend to look for child. Child answers "Here I am, Here I Am." Another idea is to have a bell and when the children sing school bells are ringing - child gets to ring the bell).

3. "Where oh Where is Dear ______________?
Where oh where is dear ______________?
Where oh where is dear ______________?
Where oh where is dear ______________?
"I am here". (10 little Indians tune)
(Class sings song--child answers "I am here.")
Fill in blank with child's full name

4. "Lazy _______________ Will You Get Up?"
Lazy _______________ Will you get up? Will you get up?
Will you get up? Lazy _______________ will you get up?
It's time to go to school.
(Children pretend to be sleeping, can sing to each one, filling in the blank with their name.)

5. "What is Your Name?" Song on Hap Palmer Record

6. "WHERE IS ____________________ ?"
(To the tune of Where is Thumbkin?)
Where is ______name______ ?
Where is ______name______ ?
Here I am!! (child stands)
Here I am!!
How are you today ______name______ (child shakes hand)
Very well I thank you!!
We're glad you're here!
We're glad you're here!

7. "We're So Glad"
We're so glad that ______________ is here today
We're so glad that ______________ is here today
We're so glad that ______________ is here today
Singing "Hip-Hip Hooray" We're so glad.

8. THIS IS THE WAY
This is the way we wash our hands
Wash our hands, wash our hands.
This is the way we wash our hands
So early in the morning.

This is the way we brush our teeth. . .
(continue as first verse)

This is the way we wash our hair. . .
This is the way we put on shoes. . .
This is the way we eat our snack. . .
This is the way we go to school. . .
This is the way we hang up our coats. . .
This is the way we clap and sing. . .
This is the way we smile at friends. . .
(Can go through all routine of getting up and ready for school, can add verses)

Opening Group Time sets the pace and atmosphere for the entire school day. It should be a relaxing, fun time for the children, so they will look forward to it each day.

COMMUNICATION: TEACHING IDEAS

Walk Around The Room

Children walk around the room and tell what they see, hear, etc. Could also do outside.

Favorites

Children each talk about their favorite foods, toys, drink, t.v. program, etc.

Toy Talk

Invite the children to bring toys or games to school. Tell them that they are going to share the toy or game by showing it, telling the class the name of it, how it works or how it is played.

Moods

From various oral reading, select brief passages that reflect joyous, angry or sorrowful moods. Make 5-inch circle faces with varying expressions. Suspend them with string against an easel. Read a passage to the children. Invite a volunteer to choose the face that best expresses how the person(s) in the story felt. Turn the other faces over. Read the passage again. Encourage the child to give reasons for his choice.

Monsters

Children listen to story Where The Wild Things Are by Sendak. They then draw monsters on paper and tell the class about them.

When speaking to the child, get at his eye level.

Stories

Read Rachel by Elizabeth Fanshawe or Howie Helps Himself by Fassler. Discuss how each child felt about being in a wheelchair. Also, read fun stories to children. Have children discuss what happened in the stories; How did the people feel?

Tape Recorder

Children can tell some "news" on the tape recorder; sing songs, etc. Play it back for children to listen to. They love this activity!

Sounds

Children listen to records of common animal sounds or household songs. If record not available, teacher can make a tape of sounds. Ask children to identify the sounds. Pictures of objects that go with the sounds are helpful.

Name

Children love their name. You can make each child a card with his/her name on it. Each morning at opening group time, you can go over the names to help children learn to recognize their name.

Records

There are many excellent records for children (Examples: Hap Palmer, LeCrone, Kimbo Records, etc.) that have good language development activities on them. In addition, children love music and many of the songs are excellent for motor coordination activities and cognitive development, too.

COMMUNICATION

Association

Have common household objects. Ask the children, "What do you do with a toothbrush?" "comb?", "soap?", "pan?", "fork?", etc.

Rhythm Band

Children play along with a record. When the music stops they stop. Vary the starting-stopping time. Tell them "I'm going to try and trick you? Who is a good listener?". Teacher can stand by record player with back to children to avoid cues, after they have done 1-2 sequences.

Questions:

Ask children yes and no questions. Do airplanes fly? Do trucks eat? Do bicycles swim? Do balls roll?, etc.

Manners

Teacher can encourage children to use "please and thank you" throughout the day. Teacher should set a good model for this to happen. Children should not be pressured to use them, but encouraged.

Loud and Soft

Which is loud and which is soft? Whisper; bang table; whistle; yell; turn record up loud, turn down soft; hum, etc. Children tell if loud or soft sounds.

Riddles

Make up simple riddles and children guess what the answer is. Example. "I am round. I am red. I bounce. What am I?" Try to give as few a clues as possible, before children guess correct answer. Let them make some up. (can do animals, furniture, toys, foods, vehicles, etc.)

Name the Tune

Play familiar songs on the record player. Only play beginning and call on child to see if he can name the song. If not, let him listen to more of the song. For non-verbal children you can have toys/objects and child points to one that fits song. For example. I'm a little teapot song, have a toy teapot with a couple other toys. Child can choose the correct one to go with the song.

Find the Clock

Hide an alarm clock with a loud tick in the room. A child's picked to find it; brings it back to the group and tells the class where he found it.

Listening is Fun

By choosing appropriate stories, poems, songs, fingerplays and records, you will help children learn that listening is fun. Also, you can build in lots of opportunities for talking about what they hear.

Surprise

One way to start a lesson is to put it in a colored laundry bag or to actually wrap it up as a present. For example: Lesson will be on fruits and so put in a shoe box and wrap up. Children will ask question, try to guess what is in it and can assist opening or getting it out.

COMMUNICATION

Is, Is Not

Ask child questions "Is grass red? Do cows say moo?" Discuss what is, and what is not. Encourage them to answer you in a simple sentence.

Feely Box

A decorated box with a couple holes in the side with flaps over the openings is fun for children. The teacher can put objects or textures in the box. Children tell how it feels, guess what it is, and can tell what it is used for.

I See Something Yellow

This song is a good one for getting children to notice other people and things in their world. Teacher sings "I see something ____________" and fills in blank. Can go over colors, shapes, etc. I see something ________________, ______________________, ____________________. I see something ______________________, Who is wearing ___________________? (Can adapt song to group interests).

Talking About Objects/Toys

Place on a table: a ball of red yarn, a red rubber ball, a stuffed toy, a toy truck, a bowl and a strainer. Spread the items so that the children can view them easily. Have the children respond to these and similar questions: Which objects are red? Which is the softest? Which toy would make the most noise if it fell? Which one can hold water? Encourage the children to justify their responses.

Vegetables

Bring in a few fresh vegetables; turnip, carrot (with leafy tops attached), spinach, cabbage, string beans, etc. Help the children identify each. Have the children touch the different foods.

Facial Expressions

Make face badges with various expressions - happy, mad, sad, surprised, etc. Talk about feelings. When are you mad? Why do we feel this way?

Opening Circle/Language Time

Talk about what each child did at home, places they went any new thing or activity that occurred at home. (Parents can keep you filled in on this by sending notes.)

Helpers

Discuss with children how they may be helpers at home. What jobs do they do? (pick up toys, help do dusting, etc.)

Facial Parts Books

Language and creative arts: Make books in the shape of an eye, ear, nose, mouth or hand. Children talk about what they use their eyes for, what do they see?, etc. They can draw pictures in their book.

Cooking

Excellent activity for encouraging children to talk about what doing, steps to make food. Sequencing, etc. (Refer to Cooking Ideas under Motor part of Curriculum).

COMMUNICATION

Snowman

In the winter, many children enjoy the story Frosty the Snowman. Why not read the story, discuss and then bring in a tub of snow to build a small snowman in the tub. Science is involved as it melts. Or better yet, weather permitting, why not go outside and build a snowman? Talk about the body parts, how snow feels, etc.

Pictures

Have children bring pictures of themselves and family members to school. Talk about them. Children love pictures of themselves and others.

Drawing/Coloring Pictures

Children draw or color pictures. They then discuss their work with the teacher, or other children.

Preschool Games

There are numerous preschool games available on the market. Children can talk among themselves as they play the games.

Field Trips

Children enjoy field trips. This expands their experiences and facilitates language development as they talk about what happened, what they saw, etc.

Rooms

Each child has a colored sheet of paper. Decide what room it will be. The child goes through furniture catalogs to pick out pictures that go in the room. They can paste on the paper to decorate the room. Talk about items they choose, function of item, etc.

Communication skills are an integral part of all the curriculum areas.

Pantomime

1. Show an object and ask the pupil to act out the use of that object.
2. Have the child pantomime familiar activities, such as sharpening a pencil, taking a piece of paper from a cupboard, etc. If this is too difficult, or if he does it improperly, have him go through the motions using the objects first, then pantomiming the motions without the object.

Tape Recorder

Tape specific sounds from the environment which the children should be familiar with. Have them identify the sounds they hear. Suggestions of tapes are:

a. Animal sounds (bird, dog, cat, pig, cow)
b. Human voices (child, man, woman, baby)
c. Bells or horns (door bell, school bell, siren, telephone, car horn, truck horn)
d. Home noises (running water, laughter, door slamming, mixer, vacuum cleaner)

Let the child select a picture when attempting to identify the sound.

Listening Game

Place a number of noisemakers behind a screen so the youngsters cannot see which one is being used. Make a noise with one of the objects and have the youngsters identify which one was used. Materials which can be used are: drum, bells, buzzer, Halloween "crickets", squeaky animal toys, rhythm sticks, tone blocks, jingles, triangels, maracas.

COMMUNICATION

Telephone

Have the child engage in play telephone conversations. (Encourage them to share ideas. You can ask questions to facilitate more communication.

Analogies

Involve the child in analogy games in which a sentence has to be completed, either by the child supplying the correct word, or choosing the correct one from a list of several. "You wash your face with a cloth." "You fix your hair with a _______________." "Snow is white." "Grass is _______________."

Do What It Says

Use an empty can. Write down on small pieces of cardboard simple directions. Have a set of 2 step, and a set of 3-4 step directions. Each child gets a turn to draw a card and do what it tells him. For example: Go touch the door. Turn off the lights. Clap your hands. Turn on the lights. Sit down. Vary the number of directives according to each child's ability levels.

What Would Happen If . . . . ?

Ask children to tell you the answer to some questions: Example: What would happen if we broke all our toys? What would happen if we left the lid off the paint jar? What would happen if we forgot to turn off the water? Encourage several solutions to each answer. Use ideas that relate to the children's experiences.

Action Pictures

Use action pictures. Ask the children what is happening? Why?, etc.

Finding Games

All objects or toys of a certain shape, certain color, certain function, certain location, etc. This can be done in the classroom or from pictures.

Why Are These Alike?

Group several objects or pictures that are related. Ask children how are these alike? Encourage them to tell you, two or three things. Example: Spoon, fork, knife, or bear, horse, dog, etc.

Fishing

A simple fishing pole can be made with short dowel rod or bamboo stick. Add a string and magnet. Make colored paper fish or shapes, number fish, etc. Add paper clips on each fish so child can "catch" a fish. Encourage children to talk about what they catch. Ask them questions about the fish.

Shopper's Bag

Draw a large chalk circle on the floor. Designate the area as 'The Garden," in a colorful shopping bag, place pictures of items associated with a garden (rake, water hose, shovel, seeds, flowers, hoe, water, vegetables, stick, whatever.) A child takes a picture from the bag and identifies it. If he doesn't know the picture name, say it, having him repeat it after you. Once the picture is identified, the child takes it and sits in the garden.

Season's Colors

Yellow is certainly one of the colors we see in the Spring. So is green. But what are some of the other colors? And what are the colors of Summer, Autumn and Winter? Do different colors make nature look any different?

COMMUNICATION

Flannelboard

Flannelboards are excellent teaching tools. By using flannel backed pictures you can encourage the child to talk about what he sees. There are also several stories on the commercial market. An example of a way to use flannelboard is: Use the flannelboard to involve a small group of children in a flower-walk story. You'll be reinforcing color names in the process. Cut out flowers of various colors and back them with flannelboard. Begin by placing two yellow flowers, roses for example, on the board. Say, "As I walked into the garden, I found two beautiful yellow roses, and I picked one." Remove one and ask the children to continue the story. Or place three red roses on the flannelboard and ask students to tell a story.

Experience Story

Children tell a story of a common experience they had (such as, a field trip). Teacher writes it on the chalkboard. Helps children understand that words can be written down. Also, encourages language development.

Transportation

Display transportation pictures. Have the children discuss them. How is each one used? Has anyone ever taken a ride on one?

Story Time

Have the child listen to a sentence, paragraph, or story, after which he is asked questions to elicit his memory of the story and his comprehension of phrases or implications in the story or ask him to retell the story.

Puppets

Excellent for encouraging children to talk. Megaphones and cardboard tubes are also good.

Questions

Display these objects on the table: bag, box, basket, bowl and bottle. Ask the children questions similar to the following: "What do you put your cereal in? What is the best thing to buy milk in? What would you keep your blocks in? What would you carry cut flowers in?" Encourage the children to give reasons for the responses.

Bottle Game

Ask the children to say "bottle" every time you name something that may be carried in a bottle, Say: "Shoes, milk, water, candy, ice cream, blocks, cocoa, cookies, orange juice, socks, oranges, balloons, etc." Naturally, ideas will vary in some instances, so ask reasons for the children's responses.

Nursery Rhymes

Say common nursery rhymes with class. Encourage them to say them with you. Leave out words to some and see if they can fill in the word.

Animal

Each child has a picture of an animal. They hold it up, when the teacher makes the animal sound that correlates with their picture.

Commands

Teacher gives child one step direction. Keeps adding one more direction to see how many the child can correctly carry out.

COMMUNICATION

Listening

--have the child close his eyes and the adult makes a variety of noises such as clapping, stomping foot, ringing bell, etc. Have the child guess 2 or 3 sounds in order. Increase the sounds as child becomes more proficient.

--listen to sounds in school and have the child identify the sounds.

--give a simple direction, have the child carry it out. After 3 successful responses, increase it to 2 directions, then 3 and maybe 4. Be sure the child does it in succession.

--give a direction, have the child repeat it before following through, as "Go to the table, pick up the book, bring it to me." Be sure he does it in succession as stated.

Magic Wand

Use a pinwheel as a magic wand. Tap a child lightly on the head and turn him into an animal. Child make appropriate animal sound. Now turn him back into himself.

Dimestore Toys

Many small, inexpensive toys and objects may be purchased at local stores. These toys are small and easily manipulated by the child. The teacher can encourage the child to talk about the objects and help the child to expand his vocabulary.

Beanbags

Each child has a beanbag. Teacher asks the children to put it "on, over, under, off, behind, front, back, beside, etc." Good way to work on spatial relationships. Teacher starts as model, and phases out, according to children's abilities. Could also give each child an empty coffee can and have them put beanbag "in, on, under, etc."

Suitcase

Great for increasing attending behavior. Teacher can tell children "I am going on a trip. Can use actual items and teacher packs suitcase encouraging children to label items. Later, could go to pictures of clothing.

Barn

Could use wooden barn or Fisher-Price Barn and say "I have a barn. What animals live in my barn?" Have rubber animals. Can go to pictures later or simply have children talk about animals, what sounds they make, what they eat, etc.

Listening

Children hide their eyes. Teacher makes 2 sounds. Children have to guess which object made the sound. Example - bell, drum, etc.

Phone

The Telephone Pioneers of America will sometimes do service projects. They can make a bear whose eyes light up when children talk to it, or a talking dog in which there is a speaker inside the dog and a telephone children talk into and voice comes out the speaker. Contact your area group to see if they do such projects. Ask operator for phone number.

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(Please refer to the Evaluation Materials Section, as some of the sources have communication ideas.)

ADDITIONAL SOURCES OF YOUR CHOICE:

motor skills

COOKING

Cooking is an excellent activity for preschool handicapped youngsters. No one activity evokes more excitement, and at the same time offers more learning experiences for children than a cooking activity. Some of the goals that can be accomplished are: 1) use of many senses (multi-sensory), 2) early mathematical skills, such as, counting, measuring, etc., 3) social skills, such as taking turns, waiting, sharing etc., 4) motor skills to mix, stir, etc., 5) early work habits such as cleaning up after the lesson, 6) self-help in feeding, washing hands, etc. 7) science through measures, liquids-solids-vapors, etc., 8) self-image building through a feeling of accomplishment (completion of a product) and pride in achievement, 9) concepts in counting, sequencing measures, etc. 10) language development--new terms are used and opportunities for vocabulary expansion, 11) early exposure to recipes and kitchen appliances, 12) introduction to early, positive nutritional habits, 13) early health habits through emphasis on safety, cleanliness, etc. 14) good opportunity for parent involvement through asking their assistance during the lessons, 15) facilitation of appropriate independence skills, 16) active participation by each child, and 17) an excellent success experience for the children. With so many positive features, it would appear advisable that cooking be a regular part of the preschool curriculum.

Some tips for doing a cooking lesson for the children are:

1. Have in mind each child's ability levels, understanding levels, and needs. How can you incorporate them into the lesson? Organize the lesson so precisely that you will know what jobs will be best for each child.

2. Have in mind how you will use parents and volunteers to assist in the lesson.

3. Be sure to know if children are allergic to any foods or are restricted in any way. Read the child's developmental and medical history, talk to the parents, and discuss with the school nurse.

4. It is helpful to write the recipe on a large chart or on the chalkboard. Use pictures along with the words. When starting the lesson, go over it step by step with the children. Then, review it as you go through the sequence of steps. Ask the children, "Who can remember what comes next?"

5. Be prepared. Have all equipment and food ready before you start the lesson. Using a clear glass mixing bowl facilitates the children's interest levels.

6. Did each child wash his hands before handling equipment and food?

7. Do the children know what they are making? Did the teacher adequately introduce it? It is good to let the children see and touch the packages; smell the food. Also, talk about where it came from.

8. Do the adults introduce new terms and carefully define them? Are the children given opportunities to share ideas and ask questions?

9. It is a good idea to check with occupational and/or physical therapists to find out if any children will need certain adaptations, special equipment,

etc. If their schedules permit, why not invite them to come for a cooking session?

10. In planning the lesson, you may want to have the table located near a sink. If this is not feasible, is water readily available when needed?

11. There will be spills! Encourage the children to clean up. Do not embarrass the child or call excessive attention to the accident. It is advisable to have a bowl of water and sponge in the area for quick clean-ups.

12. Did the children wash the foods before preparing? For example, if you are making a fruit salad, did the children wash the apples, peaches, etc.?

13. It is good to have children count together. For example: if children are shaking a jar of instant pudding, each child could get ten turns and everyone count along. After ten, the next child gets a turn.

14. Did you talk about safety? Knives, hot plates, etc., are excellent opportunities to discuss safety. Ask the children what happens if you touch a hot plate? Knives might be used by children under careful supervision. A one-to-one ratio is recommended for using knives. Use good judgement and caution when it comes to safety.

15. It is highly recommended that you choose a recipe that is quick and can be completed in a 20-30 minute period. This way the children will get to enjoy the "harvest of their labors." This is more reinforcing than if they have to wait several hours to taste the food. They may lose interest or forget the lesson entirely.

16. Occasionally, you may prepare a recipe that not every child enjoys. Encourage each child to take a taste. However, do not force them to do so, as this may permanently turn them off to the food. You may find more willingness to taste a new food because they prepared it.

17. Offer genuine praise and comments when the children do well in following directions, performing the task, use good manners, etc.

18. Remind the children that if they have to cough or sneeze to turn away from the food and cover their mouths. Explain the reasons why.

19. Encourage the children to clean-up after the lesson. Provide a good model on how to wash the utensils, bowls, etc. Guide them in washing the table with sponges. Even if a spot has been missed, recognize the child's efforts. Improvement comes with guidance, not criticism.

20. Sometimes raisins and popcorn are too hard to chew for some children. Find out which children should not have these items. Use caution when you do have them.

21. In planning what to cook, why not choose to make healthy, nutritional foods? This will facilitate positive eating habits at an early age.

22. Help the children to enjoy the lesson. Make it fun for them by considering Steps One through Twenty-one above.

SOME RECIPES FOR COOKING

Fruit Toast

1. Make toast
2. Add favorite fruit slices (peaches, apples, etc.)
3. Sprinkle with cinnamon

Fruit Soup

Bananas
Orange juice
Slice bananas into paper cups (the children can use plastic knives); pour in some "soupy" orange juice. Enjoy.

Yummy Low Fat Milkshake

In a blender, combine 4 oz. skim milk, 3-5 tsp. sugar or honey, 6 ice cubes, fruit of choice (1 banana, 1/2-1 cup strawberries or any desired berry, 1/2 cup pineapple, 1 skinned peach), and 1/4 tsp. vanilla or other complementary flavoring. Blend at high speed for approx. 30 seconds. Makes approx. 16 oz. milkshake.

Applesauce

1 cup water (add more if desire)
4 apples, diced
1/2 cup honey
Put all ingredients in blender, then eat.

Fruit Salad

2 apples, cut into small pieces
2 bananas, cut into small pieces
2 oranges, cut into small pieces
1/3 c. raisins
1/3 c. crushed pineapple
Children help cut up ingredients (with adult supervision.) Let them mix it up with mixing spoon. Optional: add some yogurt to recipe.

Taste Day

For a different cooking activity let the kids taste a variety of foods with different textures. Such as lemon, cheese, banana, Grape Nuts, pretzels, etc. Point out which is hard, soft, crunchy, sour, sweet, salty, etc.

Cheesy Wheats

2 cups spoon-sized rice chex
2 cups spoon-sized shredded wheat
1/2 cup (stick) margarine
1 cup shredded cheese (Cheddar, etc.)
In a large saucepan, melt margarine. Add cheese. When the cheese begins to melt, add shredded wheat. Toss to coat well. Refrigerate if not to be eaten within an hour or two.

Fruit Shakes

Put bananas, strawberries and milk in a blender.

Banana Split

Peel a banana and slice it in half lengthwise. Put it in a bowl and put a scoop of cottage cheese on it. They top the cheese with fruit cocktail.

Fruit Dipped in Yogurt

Cut up different fruits such as apples and bananas in bite-sized chunks. Let children dip them in different flavors of yogurt.

Raw Vegetable Platter

Have the child help you wash and cut a variety of raw vegetables into bite size pieces. You may want to use carrots, tomatoes, radishes, celery, cauliflower, cucumbers, etc. For an extra touch, put peanut butter, cheese spread or cottage cheese in a small dish as a dip for the vegetables.

Pancakes/French Toast

Use favorite recipe or instant recipes. Cook in electric frying pan. Can make "different shapes."

Orangeade

Children squeeze fresh lemons and oranges. Mix together and add one large can of frozen orange juice.

New Experiences

Cut open and taste pineapple, coconut, avocado, cantaloupe, cucumber, etc.

Cut-out Sandwiches
Children use cookie cutters to cut out shapes from lunch meat and bread.

Rice Cereal Bars
1/2 cup margarine
1 tsp. vanilla
1 lb. marshmallows
2 - 5 1/2 oz. pkgs. rice cereal (e.g. Rice Krispies)
Melt margarine and marshmallows over double boiler. Add vanilla--beat till smooth. Add cereal, spread in 9 X 9 inch pan. cool.

Banana-Wheat Germ Snack
Let children peel and cut bananas into bite size pieces. Dip each into a mixture of half milk and half honey. Drop pieces of banana into a plastic bag filled with wheat germ and shake until well coated.

Peanut Butter
Let children make peanut butter sandwiches. Can also put peanut butter on apple slices.

Orange Refresher
1-2 eggs
1/3 cup orange juice concentrate
1/4 cup powdered milk
1/2 banana (or other equivalent fruit)
honey to taste
3/4 cup water
ice
Mix in blender. The more ice you add, the slushier the drink becomes.

Fruit Jello
Make jello. Add citrus fruits when it begins to harden. Stir in some yogurt.

Butter
Put small container of whipping cream in a clear jar. Each child gets to shake it 10 times. As soon as thickens spread on salted crackers for homemade butter.

Popcorn
Use favorite recipe. Salt lightly or eat plain. (nutritional)

Banana Instant Pudding
2 mashed bananas
1/2 cup applesauce
2 tbsp. peanut butter
2 tbsp. honey
Stir until smooth and chill. Can sprinkle with cinnamon or wheat germ before serving.

Pizza Buns
Put tomato sauce and cheese bits on an English Muffin. Bake until cheese melts.

Real Banana Pudding
Make banana pudding. Put fresh banana slices on top of each serving.

Potato Salad
Boil eggs and potatoes. Peel potatoes and eggs. Mix together with small pinch of salt and pepper and 1/2 cup of mayonnaise.

Egg Nog
Use your favorite recipe.

Grilled Cheese Sandwiches
Each child puts margarine on one side of bread cut in 1/2. Add one slice of cheese and put in electric fry pan until cheese melts.

Cheese Crispies
1/2 lb. cheddar cheese, grated
1/4 lb. margarine
1 c. flour
1/8 tsp. salt
Mix until smooth. Roll into small balls. Place in buttered electric frying pan at 350 degrees for 15 min.

Milk Shake
Blend: 1 cup plain yogurt
1 cup orange juice
1 ripe banana
2 tbsp. honey

Banana Smoothy
Blend: Banana, Honey and Milk.

Muffins
Use your favorite recipe. Serve with fresh fruit.

Doughnuts

1 package refrigerator rolls.
Cut dough into circles and let each child cut a small hole in the center of the circle. Tops from detergent bottles make excellent hole cutters. Dip the dough into hot fat in a skillet or deep fat fryer. CAUTION--Keep children at a safe distance and do not let them touch the doughnuts until cool. Shake the cooked doughnuts in a bag with sugar in it. Serve with cider or apple juice.

Banana Orange Frosted

Peel and slice 1 banana
Place in bowl and mash with fork
Add 1/2 c. orange juice
Beat with rotary beater until smooth
Add 1/2 C. cold milk
1/2 pint (1 c.) orange sherbert
Beat again until smooth. (2 servings)

Miss Muffet Special: Curds & Whey

2 c. milk
1 tbsp. vinegar
Stir milk over medium heat until it starts bubbling. Remove from heat, add vinegar and continue stirring until curds form. Strain off the whey, squeezing out any that remains with a spoon. Add a little salt and serve on saltines.

Purple Cow

Mix 1/2 cup of grape juice and one (1) cup of milk. Serve icy cold.

Orange Eggnog

Ingredients: One (1) cup cold milk, one (1) raw egg, one (1) tbsp. Powdered sugar, 1/4 tsp. vanilla, 1/4 cup orange juice.
Mix everything in a bowl and beat for two (2) minutes. Pour into glasses. Serves two.

Picnic

Why not have a picnic outside? Children can prepare their own lunch and eat out at local park or on school grounds.

Hot Chocolate

Fun to make and drink on cold days.

Meatless Tacos

Make tacos without the meat.
Lettuce, tomato, cheese on taco shell. (Can add mild taco sauce if desire.)

Vegetable Soup

3 carrots
2 potatoes
4 celery stalks
1 vegetable
1 beef boullion cube
1 large can tomato juice
1 c. water
Cut up vegetables into bite size pieces. Mix the vegetables with the tomato juice, beef boullion cube and water, in a large pan. Bring to boil, simmer about an hour and serve. Could also prepare in crock pot and children have for lunch.

Health Nuggets

1 1/3 c. wheat germ
8 graham cracker squares crushed coarsely
1 1/2 c. peanut butter
4 T. honey
Mix, squeeze together to form small balls. Makes 2-3 doz. Chill any that are not eaten.

Super Cookies

1 1/2 c. oatmeal
1/2 c. non-fat dry milk
1/2 c. wheat germ
1/2 c. honey
1/2 tsp. salt
1 tsp. cinnamon
1/3 tsp. cloves
1/2 c. oil or melted butter
2 eggs, beaten.
Mix all dry ingredients. Add melted butter and beaten eggs. Spoon onto greased baking sheet. Bake at 350 degrees for 12-15 min.

Homemade Ice Cream

6 eggs, 2 cans evaporated skimmed milk, 1/2 c. sugar, 2 tsp. vanilla. Use egg Beater and blend together. Pour into gallon size ice cream cannister. Add 1/2 gallon 2% milk. Mix thoroughly. NOW freeze ice cream mixture.

SWEETS ENCOURAGE DENTAL DECAY

Scientific research shows that sugar in and on food creates mouth conditions which speed up the process of dental decay. The in-between-meal use of candy, gum, cakes and soft drinks is particularly injurious to teeth. Sticky sweets or those which remain in the mouth for long periods of time (chewing gum, hard candy) are the most damaging.

No-No Snack List

Candy is 75 to 85% sugar. Popular candy bars weighing 1 to 5 ounces contain 5 to 20 teaspoons sugar.

Food:	Amount:	Sugar Content:
chocolate cake	2 layer iced	15 tsp.
cherry pie	1 medium piece	14 tsp.
brownies	1 average	3 tsp.
doughnuts (plain)	1 average	4 tsp.
jam and jelly	1 tbsp., level	3 tsp.
chocolate fudge	1-1/2 inch square	4 tsp.
chewing gum	1 stick	1/2 tsp.
hard candy	2 oz.	8 tsp.
marshmallow	1 average	1-1/4 tsp.
figs, raisins, dates	1 cup	15 tsp.
sweet rolls	1 average, frosted	13 tsp.
soft drinks	12 oz.	8 or more tsp.
Kool Aid/Orange Hi-C/Tang	8 oz.	4-6 tsp.
cupcakes	1	6 tsp.
ice cream	1 scoop	4 tsp.

Choose Your Snacks From These Foods

Fruit
- apples
- apricots
- avocados
- bananas
- blackberries
- cantaloupe/watermelon
- cherries
- grapefruit
- grapes
- oranges/tangerines
- peaches
- pears
- plums
- raspberries/strawberries
- tomatoes

Vegetables
- cabbage
- cauliflower buds
- celery strips
- cucumber slices
- green onions
- lettuce
- peas
- green pepper slices
- radishes
- olives
- pickles
- water cress

Beverages
- whole milk
- skim milk
- buttermilk
- tomato juice
- unsweetened juices: apple, orange, grapefruit, cranberry, pineapple
- artifically sweetened carbonated drinks
- mixed vegetable juice

From: University of Iowa Hospitals and Clinics, Dietary Department, Iowa City, Iowa.

A few additions to Hand-out were added from:

Lansky, Vicki The Taming of the C.A.N.D.Y. Monster. Wayzata, MN.: Meadowbrook Press, 1978. (Excellent reference.)

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ADDITIONAL SOURCES OF YOUR CHOICE:

Gross Motor Skills

Gross Motor Skills are important for helping each child learn how to plan and adjust movements in relationship to his body and his environment. There are many ways adults can promote these skills in young children. Please be aware that:

1. Some children may need additional verbal directions to perform these activities or you may need to change the wording of your directions. Also, are they developmentally ready for the activity?

2. A physical demonstration may be necessary before a child understands what it is you want him to do.

Some activities are:

1. Obstacle Course (all time favorite). You can use tunnels, chairs, tables, mats, tires, empty fiber barrel, rocky boat, jungle gym, etc. Set it up in a planned path. The teacher first tells the class how to go through it. Then either the teacher or a chosen child should model how to do it before the children proceed through the course. It is good to use descriptors, such as, on, in, over, through, under, up, down, etc. Children enjoy doing this as music is played. A variation is to then let children go through the course any way they wish. Could be set up outside, too.

2. Circle Activities - make a large taped circle on the floor (Hint: don't use masking tape as hard to get off if down more than a couple days. Use colored cloth tape.) Children stand on circle and follow various directions, such as, jump in, walk on it backwards, sideways, walk straddling the line, tiptoe, etc. Each child could also have a small hoop and do assorted activities. (These can be purchased or made from plumber tubing hooked together to make a circle).

3. Crossing the River - place 2 ropes on the grass, parallel with each other (wiggly for river). Start 6 inches apart. Have children take turns jumping over the river. Can make the river wider as children progress in jumping.

4. Stepping Stones - cut several pairs of footprints from heavy paper (oil cloth lasts longer). Set out a pattern on the floor. Children follow the foot steps by placing their feet on them. Start out simple and progress to more complex patterns.

5. Marching - children march to music around the room. Can kick knees high, walk on tiptoes, jump, swing arms high, etc.

6. Tumbling Time - children each take a turn doing various activities on tumbling mats. Roll, crawl, somersault, soldier crawl (pull on stomach), etc.

7. Balance Beam - (can be purchased commercially or homemade - a simple one is a 2 x 4 - 8 feet long, place flat on the floor). Children can do assorted activities, such as, walk forward, backwards, walk straddling the beam, walk it with eyes closed, etc. Another idea is

to put an 8 foot cloth taped line (2 inches wide) on floor. Children can practice on this taped line and them progress to balance beam.

8. Toys - tricycles, riding toys, scooter boards, wagons, pull toys, rocky boat, etc., are good for developing large muscle skills and coordination.

9. Jungle Gym, Swings, Slides, Small Trampoline, Etc. - are fun for children and good for developing gross motor skills.

10. Some games develop muscle skills. Please see Games Hand-out this section.

11. Exercises

    A. General kinds: running, jumping, skipping, rolling, windmill (swing arms in a circle, forward, now swing backwards), ringing bells (bend down, keeping knees straight sway from side to side), jumping jacks, bouncing ball (bend knees way down, jump up and clap hands over head), swimming (sometimes available), dancing (twist and shake in place to music), etc.

    B. Animal Walks:

    Elephant Walk: Bending forward at the waist with arms hanging limp, take large heavy steps and sway arms from side to side. This imitates the elephant and his trunk.

    Kitten's Walk: Bend down placing your hands on the floor and walk forward very slowly.

    Kangaroo Jump: Bend your knees way down, jump forward and landing with your knees bent.

    Bunny Jump: Bend down and place your hands on the floor. Now jump forward with your feet, toward your hands.

    Frog Jump: Bend your knees way down and place your hands on the floor in front of you. Now jump forward to your hands. Croak.

    Turkey Walk: Bend your knees way down. Hold on to your knees and walk forward.

    C. Relaxation: Children lie on the floor listening to quiet music and try to feel "heavy." They become completely relaxed.

    Raggedy Ann and Raggedy Andy - the children walk about with heads down and loose movements of legs and arms.

ART

Art activities may enhance motor skills in a relaxed and fun atmosphere. There are many other values, such as, self-expression opportunities, social, cognitive, etc. Leo Buscaglia has discussed in his book Love that teachers should not have children draw a lollipop tree like theirs. Often children have seen, felt, climbed and eaten apples from trees. Thus, they should be free to draw a tree the way they perceive it. The point is: sometimes we place our standards on children. Why not let them develop their own ideas and creativity through art?

As with all activities, the teacher will have objectives in mind for each child. In addition, it is hoped the teacher will allow the children opportunities to "do their own thing." After the creations are completed and displayed--do they all look alike? If so, perhaps they're the teacher's ideas rather than the children. Each child is an individual and therefore, we should be able to see uniqueness in each masterpiece. By building this idea in to each activity, we will enhance a child's pride for his accomplishments.

Some considerations in doing art with the children are: 1) Each child can wear a smock or old paint shirt, 2) tape may sometimes be helpful to tape paper to the table, to prevent sliding, 3) recycle papers. Old papers that are not written on the back can sometimes be used for coloring, etc., 4) never throw away the children's art. Display it throughout the room, let them give away to others as presents or they can take them home for their parents, 5) encourage the children to clean up after they are done with a project (self-help and work habits), 6) stapling black strips of paper around the edge of a picture serves as a frame, 7) avoid making value judgements on the children's creations, 8) have children show each other their completed projects. Find good things to say about the projects, 9) some children may do better in a different position, such as, floor sitting, etc. Be sure to check with occupational and/or physical therapists to know the best positions for each child. 10) adapt or modify activities according to children's ability levels, 11) offer the children opportunities to participate in a variety of activities, and 12) encourage the children to have fun. The teacher can also do a picture along with the children.

I. PAINTING ACTIVITIES

A. Water color painting on large sheets of paper.
B. Tempera painting with large brushes on large sheets of paper (could also paint a large refrigerator box and can be used as a playhouse).
C. Sponge painting
D. Tooth brush painting
E. Brush painting objects; (i.e. rocks, wood, egg cartons, paper plates, etc.)
F. Mural - use butcher paper - entire class paints pictures on one large sheet of paper.
G. Fingerpainting (see sensory ideas handout)
H. Straw painting - put drops of paint on paper. Child uses straw to blow paint to make a design.
I. Bolattoes - paper folded in half - one half paint on it. Now fold it. Mirror image will be formed on the other half.

J. String Painting - fold paper horizontally. Open and make a design with paint dipped in string. Allow end of string to dangle from outer edge of paper. Pull through. Fold paper vertically and do same procedure.
K. Splatter Painting - place paper on record player. Turn record player on and drop paint onto paper. (splatter effect). Adult should carefully monitor.
L. Eye Dropper Painting.
M. Q-tip Painting.
N. Painting on Sand - spread glue over cardboard. Sprinkle sand on glue. Let dry. Use tempera paint and paint designs on sand.
O. Fill cleaned out deodorant bottle with paint. Children roll on paint.
P. Squeeze Bottles - mix together equal parts of salt, flour and water. Add food coloring. Pour into squeeze bottles for children to use to squeeze-paint pictures.
Q. Plastic Spoon - mix orange, white, yellow and brown tempera paint to consistency of mustard. Put glob on paper. Child uses a spoon to mix it around and spread for a creation.
R. Pepper Shaker Painting - put dry tempera paint in pepper shakers (they have smaller holes). Several shakers, each containing a different color. Shake on shelf paper that is wet.
S. Window Paint - a mixture for painting on windows may be made by mixing equal parts of Bon Ami, Alabastine and dry tempera paint. (Alabastine is another name for glass paint or whiting. It comes in powder form and is obtainable at hardware or paint stores.) Add enough water to make a creamy paste. This mixture may be painted on the window with a small brush or clean rag. It may be wiped off easily with a damp cloth and does not mar the window in any way.

II. PRINTING (Dip objects in paint and stamp print patterns and designs)

A. Junk Printing - use plastic shapes, blocks, etc. Children dip in paint and print on paper.
B. Sponge - use only a little paint. Child makes prints on paper.
C. Spools.
D. Waded Up Newspaper.
E. Various Pieces Of Wood.
F. Vegetable Prints - cut up pieces of carrot, celery. Dip in paint and make prints. Cut designs in potato and do potato print. (Makes ideal wrapping paper if done on butcher paper).
G. Thumbprints - children put thumb on ink pad and stamp thumbprints. They can also draw faces to the thumbprints to make aninimals.
H. Paint Prints - child paints on one sheet. Takes a second sheet and puts over original to make a print.
I. Table top print - if children fingerpainting, could have them do on a smooth table top. They then take a piece of colored construction paper and put on the design to make a print.
J. Leave Prints - Put leaves on a table. Cover with paper. Use a brayer and roll over the leaves. Make a print of the leaves. (can also do this with chalk.)
K. Legal Stamps - children take stamps such as "confidential, etc." and use ink pad to stamp on paper.

III. GLUING ACTIVITIES

A. Collages - unlimited possibilities. Use various feathers, materials, seeds, ""odds n'ends" and paste on paper.
B. Egg Shell Collage
C. Drop Art -Use lid from shoe box or other box -(lowsides) -children make a glue design. They can then put sand, colored rice or seeds in box and shake. The materials stick to glue. Allow to dry. When you hang up, edges of box serves a frame.
D. Holiday Collages - use colored scraps of paper, material, etc., appropriate to particular holiday or season. Children glue on paper or cardboard.
E. Murals - children paste shape, paper scraps, wood etc., on large sheet of butcher paper to make class mural.
F. Stickers - children paste stickers or use self-adhesive ones to make a picture.
G. Yarn - children glue various pieces of colored yarn on paper.
H. Colored Rock Salt - color rock salt with food coloring. Let dry. Children paste colored rock salt on paper. Can also use colored rocks that are used in aquariums.
I. Wood Creations - children glue various sizes and shapes of wood togehter.
J. Animals
   1. Chicks - glue on popcorn
   2. Bear picture - glue on coffee
   3. Lamb picture - glue on cotton
   4. Cats - glue on poppy seeds
K. Paper Weights - put some colored gravel in baby food jar. Add water. Glue lid on.
L. Stained Glass Windows - collect a plentiful supply of colored tissue paper scraps. Have the children dip their hands in liquid starch and spread it liberally on a small portion of a window. Then have them smooth on the pieces of tissue paper. Continue until an entire pane or several panes are covered. The more colors, the better the result. (This decoration can be cleaned off the windows easily with warm water.)
M. Nature Collage - children gather acorns, leaves, sticks, etc. They then glue on cardboard for a picture.
N. Wastebasket - children glue onto sides of Baskin-Robbin empty ice cream containers various scraps of wood, material, paper, etc. Then they can give to family for a wastebasket.
O. Candle Holder - children glue on glitter, colored rocks, etc., on side of baby food jar. Can then purchase small candle to put in jar. Children can give to families.
P. Pencil Holders - children decorate juice cans.
Q. Letter Or Recipe Holder - use one whole plate and one half plate. Punch holes around the edges about 1/2 inches apart. Sew the plates together to make a letter holder, recipe holder, etc. Children decorate as they wish.
R. Saw-Dust Design - take stencil and place on paper. Fill stencil with paste. Cover with saw-dust or sand. It will leave imprint of stencil used.

S. Paper Chains - strips of colored paper glued together in an interlocking fashion. Can be hung in classroom.
T. Paper Mosaics - children glue small pieces of colored paper on white paper.
U. Basket - take cottage cheese container. Add decorations and glue on a handle. Children can use in housekeeping area or to carry small objects or toys.
V. Snowman - children glue cotton balls together to make a snowman. Let them decide how they want to do it.
W. Turkey - glue colored strips of paper on paper plate; can add a face with a crayon.
X. Ornaments - a) glue colored spools together, add a string; b) decorate paper cups, add a string; c) jar lids, plastic lids that are decorated, add a string for hanging.

IV. MOBILES

A. Children glue pictures on coffee can lids attach with string to hanger.
B. Make smell cards from assorted scents attach with string to hanger.
C. Paper Plate Creations - children color plates or glue pictures on it. Attach strings and hang up.
D. Paper Bag Fish
    1. Have each child rip strips of newspaper and stuff in small paper bag.
    2. When the bag is approximately three-quarters full, tie it closed with heavy cord. The bag will now resemble a fish with tail.
    3. Have each child paint his fish. When the fish is dry, it can be decorated.
    4. Attach cord to head and tail of fish and hang from ceiling.
    5. Fish song:

1-2-3-4-5
I caught a fish alive.
6-7-8-9-10
I let him go again.

Why did I let him go?
Because he bit my finger so!
Which finger did he bite?
The little one on the right.

V. COLORING ACTIVITIES

A. Water Color Over Crayon - children color paper. Then they paint over it with water colors.
B. Coloring - freely and relaxed on large sheets of paper or butcher paper (can do a class picture, too--mural).
C. Colored Chalk On Wet Paper - (wetting the paper with milk will help keep the picture from smearing.)
D. Colored Chalk On Dry Paper - children use an eraser and smudge over it.
E. Crayon Splash
    1. Materials: shaved crayons, two sheets of waxed paper per child, aluminum foil, iron. (Variation-colorful yarn or thread)
    2. Drop crayon shavings on 1 sheet of wax paper. Place second sheet on top and cover with aluminum foil. Iron at medium heat. Note: Adult is in charge of iron.

F. Crayon Etching
  1. Take cardboard and crayons. Press heavily on crayons on cardboard. Then cover entire paper with black crayon.
  2. Etch design with tooth pick, or semi-pointed tool.

G. Free Coloring on newspaper.

H. Coloring on large refrigerator box. Box can then be used for playhouse.

VI. MISCELLANEOUS ACTIVITIES

A. Tie Dye Paper. Use several plastic containers. Fill with water and color with food coloring. Use paper towel and crumple. Dip parts in assorted color water containers. Unfold paper and let dry. Next day can be stapled on paper and framed with black strips. B. Valentine's Day -cut out a large heart and paste an outline of your hand on it. On the hand, paste a child's drawing, coloring, etc. The teacher can write on it, "I give you my heart to love you. I give you my hand to help you. I give you myself."

C. Egg Carton Caterpillar - use one row cut from egg carton. Paint egg carton. Decorate caterpillar by dabbing with paint dipped Q-tip of different colors or glue on fuzzy balls, etc.

D. Bird Feeders - roll pine cones in peanut butter and then in bird seed - hang out where the kids can see the birds come to eat, or child glues sand and seeds on a cardboard shape. Attach string. Can hang in a tree to feed birds.

E. Letter Holder - children decorate spring clothespin. Take home for families to use as a letter holder.

F. Pumpkins/Turkeys/Beachballs/Jack O'Lanterns - use paper bag. Each child stuffs with crumpled up newspaper. Decorate or paint to make a pumpkin, turkey, beachball or jack-o'lantern.

G. Sticks With Horse Heads - these horses are fun to ride; a child can walk, trot, or run with them. Can make the head from a small paper bag stuffed with newspaper. You can use a dowel stick and attach head to it.

H. Tissue Paper Balloons - cover balloon with layers and layers of starch saturated tissue paper. Add corks for feet when dry and make piggy bank.

I. Place Mats - children color paper. Cover with clear contact. Can give to families for presents.

Scissors

Using scissors is a skill some older preschool handicapped children learn to do. It requires a lot of fine motor skill to use scissors effectively.

I. Some prerequisite skills to using scissors are:

1. Pincer grasp skill.
2. Palmar grasp skill.
3. Eye-hand coordination.
4. Bilateral hand usage (one holds, the other cuts).
5. Concentration and attention to task.
6. Perception - ability to discriminate likenesses and differences (as between dark lines on paper and the white background).
7. An interest and desire by the child to learn the skill.

II. Some pre-scissors activities to develop readiness for scissors are: (not necessarily in order of occurence)

1. Squeezing play dough and nerf balls - (pincer grasp, palmar grasp).
2. Fingerpainting - bilateral hand usage eye hand coordination.
3. Water play - bilateral hand usage eye hand coordination.
4. Squeezing spring clothespins (such as, pulling off or putting on edge of a coffee can).
5. Picking up cotton with tongs.
6. Tearing strips of paper (use of both hands and see the relationship of tearing and cutting).
7. Teacher modeling scissors usage.
8. Punching holes with paper punch.
9. Training scissors - double scissors used by both teacher and child. Together they cut long narrow strips of paper. (not over 1/2 inch wide). The child can see results easier by using narrow strips.

III. Using Scissors

1. After using training scissors, the child may be ready for his own pair of scissors.
2. Start with 1/2 inch strips. As skill increases you can give him 3/4, 1, 2, and so on until you get to 4-6 inches wide paper. Be sure and teach paper holding with the opposite hand. Also, be sure and give him either left or right handed scissors depending on his preferance. He could cut out pictures from magazines or catalogs for practice.
3. You can now start him on cutting lines. Use black magic marker and make wide lines. Be sure and model how to cut one before letting him do it.
4. As competency to stay on the lines is exhibited, decrease line width until you get to a regular primary pencil line.
5. You can then begin to make curved lines, (thick) and decrease width of simple curved lines until cutting on primary pencil line width.
6. More complex line patterns can be drawn for the child to cut on as you observe his ability to handle them.

7. You can glue pieces of yarn on paper and have the child cut along the yarn or stay between the yarn lines.

Suggestions:

1. The teacher should provide good modeling examples for the child.
2. Observe the child carefully to know when he is ready to move on to more complex steps.
3. Be sure child has correct scissors either right handed or left handed.
4. Remind the child about safety and why it is important with scissors.
5. If the child does not exhibit good scissor skills, ascertain if you have broken the steps down to small enough parts. Also, does the child have the motor development skills? You should talk this over with physical and occupational therapists if in doubt.
6. Child could use squeeze scissors, if poor fine hand skills. These are available from the Developmental Learning Materials Company.

FINE HAND SKILLS

Fine hand skills are used in all facets of a child's educational program. Many checklists have a great emphasis on activities that require a child to use fine hand movements. For some this skill is quite difficult and they must practice to improve performance. Also, tasks may need to be broken down in units the child can successfully master. You will find that fine hand activities are listed throughout this resource guide. A few other ideas are:

1. Pegboards, Formboards, Formbox, Puzzles--the quantity of each task is determined by the child's skills.

2. Block Play.

3. Manipulative Toy Play.

4. Stringing rings (such as large slices from Pringles cans or coffee can lids with center cut out); stringing one inch beads; stringing Cheerios and/or Life Savers. String slices of toilet tissue tubes.

5. Suspend inflatable ball from ceiling. Children bat it with hands, and catch it.

6. Soap bubbles--blown in the air and children try to grab them.

7. Rhythm Band (universal favorite). Great for encouraging fine hand skills.

8. Matching--put lids on proper jars and secure them.

9. See: Art, Cooking, Sensory Activities, Games, Five Senses, and other Hand-outs in this resource guide.

Sensory Activities

A child's senses are involved in everything a child does. Research indicates that a classroom that employs a multi-sensory approach to teaching preschool handicapped children is very important, (Karnes, 1975). Below are some fun activities that facilitate the use of the senses and hand skills. Why not try some of these today?

I. WATER PLAY (one of the favorite activities of preschool)

A. Filling tubs with water. Can vary temperature from warm to cool. Children can use cups, small boats, funnels, sponges, egg beaters, balls, straws, medicine dropper, etc. Could include objects that sink and ones that float.

B. If extra changes of clothes, letting children walk in a gentle, warm Spring drizzle. (Be sure parents know before you do it.)

C. Water painting sidewalks or any surface outside that won't be hurt by water. Also, could water paint chalkboard.

D. Washing the play dishes. Giving the dolls a bath.

E. For water play in tubs can add detergent for bubbles.

Soap Suds

Make soap suds in plastic bucket.
Put fly swatter in and swing around
to make soap bubbles.

Recipe for Soap Bubbles

1 Quart warm water
2 Level T. soap powder
1 T. sugar
1 T. glycerine (optional, makes
  bubbles iridescent)

Mix in large pitcher. Use straws for bubbling. For variation try adding red or green coloring to water.

F. Science - children add sand and salt to water what happens? What happens to a paper towel? Talk about tea kettle water versus ice cubes. Do an experiment to show them the differences.

G. Talk about wet-dry; full-empty; hot-cold, etc. concepts when playing in the water.

II. SAND PLAY (another favorite)

A. Sand in tubes, sand table, etc. Can use many of the same pieces of equipment used in water play (except egg beater). Others are: shovels, buckets, measuring cups, sieve, etc.

B. Talk about rough-smooth, full-empty; pouring-sifting, etc.

(Variations of Sand play but with different materials are under Part IV.)

III. FINGERPAINTING (all time favorite)

A. Fingerpaint (commercially purchased)

B. Homemade Fingerpaint

3 T. sugar
2 C. cold water
1/2 C. cornstarch
Food coloring

Mix the first two ingredients then add water cook over low heat, stirring constantly until well blended. Divide into 4-5 portions; add a different food coloring to each, plus a pinch of detergent. Detergent facilitates clean up.

C. Wallpaper Paste Fingerpaint

3 parts water
1 part paste flour
coloring

Stir flour into water, add coloring. (Wallpaper paste can be bought at low cost in wallpaper stores or department stores.) Some children enjoy the different touch sensation when 1 1/2 cups of salt is added.

D. Soapflakes Fingerpainting

In a large plastic bowl, add Ivory Flakes or Ivory Snow, liquid food color (if desired). Add water to desired consistency.

E. Glob

Add desired consistency of water to cornstarch. Let children feel it and play with it. Can add food coloring (if desired).

F. Mud fingerpainting.

G. Pudding painting.

H. Wet cornmeal painting.

I. Whipped cream fingerpainting (children enjoy fingerpainting a mirror. Can build in body image, too.

J. Shaving cream fingerpainting.

K. Flour paste fingerpainting.

L. Dry Powder fingerpainting. Wet fingerpainting paper thoroughly and sprinkle dry fingerpaint on saturated surface. Spread with hands and fingers.

M. Slime (commerical product).

N. Cornstarch Fingerpaint

8 parts water
1 part cornstarch
Coloring
Method: Bring water to boil (colored slightly darker than desired paint). Dissolve cornstarch and stir the two together. Bring water to a boil again. Cooled paint will be slightly thicker.

O. Wet cocoa painting.

IV. OTHER SENSORY MEDIA

A. Mix together split peas, macaroni, popcorn, rice, and beans. Children can use the same equipment as listed above.

B. Flour play - add small amount of water to eliminate dust.

C. Styrofoam pellets used in packing (closely supervise).

D. Corn play.

E. Wet spaghetti - slightly cook spaghetti until soft. Children can put on colored bristleboard. When it dries it will stick to the bristleboard.

Recipes for Making Sensory Materials

Play Dough

3 C. flour
1/2 C. salt
3 T. cooking oil

Add water to desired consistency. Store in airtight container, plastic bag, or refrigerator.

Finger Jello

Combine -
3 packages small orange jello
3 packages unflavored gelatin
5 cups boiling water
Pour into shallow pans, refrigerate to jell. You can cut into various shapes and let the children play with it at table (like playdoh) or you can cut into circles.

Cooked Play Dough

Recipe - DO NOT DOUBLE

Mix: 2 cups flour
1/2 cup salt
1 tablespoon alum

Bring to a boil 1 1/2 cups water. Add 1 tablespoon cooking oil and food coloring. Combine water mixture and dry mixture. Mix and knead until smooth in texture. Store in a plastic bag in a sealed can or the refrigerator. (Non-edible)

Edible Peanut Butter Play Dough

4 T. peanut butter
4 T. honey
powdered milk

Mix peanut butter, honey, and powdered milk. Mix with hands. Continue adding powdered milk little by little until mixture forms a dough with body which does not stick to fingers. Carob or cocoa powder may be added if desired.

Roll out and cut with cookie cutters, THEN EAT.

Cornstarch Modeling Mixture

Non-edible

1 cup salt
1/2 cup cornstarch
1/2 cup boiling water

Mix salt, cornstarch and water in pan. Heat over low fire, stirring constantly until mixture is too stiff to stir. When cool, knead until smooth. Paint articles when dry.

White Face Paint

Here is a basic formula for white makeup that can be tinted any color you want with food color. Keep away from the eyes of a small child. Put it on thin over a coat of cold cream or hand lotion. It's edible in case it gets in the mouth!

2 teaspoons white shortening
5 teaspoons cornstarch
1 teaspoon white flour
glycerin
food color

Using rubber spatula, blend first 3 ingredients on a white plate to form smooth paste. Add 3 or 4 drops gylcerin for a creamy consistency. The yield should be enough for one child's face.

From: Delaware County, Cooperative Extension office.

Knox Blox

4 envelopes Knox Unflavored Gelatine
3 packages (3 oz. ea.) flavored gelatine
4 cups boiling water

In large bowl, combine Knox Unflavored Gelatine and flavored gelatine; add boiling water and stir until gelatine dissolves. Pour into large shallow baking pan (for example, 13" X 9") and chill until firm. Cut into squares to serve. Makes about 100 one inch squares. Can use like play dough and also eat.

Saw Dust Modeling Mixture

Mix 1 C. sawdust with 1/2 C. wallpaper paste. Add enough water to make mixture like soft putty. Squeeze and pat modeling mixture, shape and paint when dry. (Non-edible)

Paper Mache (Non-edible)

Tear newspaper into 1/2 inch wide strips or shred into small pieces. Soak in water 24 hours. Squeeze out excess water and add flour paste, wallpaper paste, or laundry starch. Let children help mix.

**Children have fun mixing many of the recipes. Low photo trays are helpful to contain some of the ingredients in one area. Good adult supervision is a necessary part of these activities.

The Five Senses

The Five Senses are in everything a child does. They are in his every interaction with people and his environment. Through the use of the senses the child becomes more aware of his world. Below are a few activities for the classroom:

I. Smell (Olfactory)

A. Can make smell cards or smell jars (from baby food jars.) Examples of items that could be used are: coffee, tea, vanilla, cheese, cocoa, dry mustard, Vicks, cinnamon, linament, perfume, etc. Peppermint is not a good one to use, as may inhibit breathing (Fieber, 1979.)

B. Could make pairs of cards or smell jars and children match smells.

C. Which odors are pleasant and unpleasant?

II. Listening (Auditory)

Make Listening Jars (from baby food jars.) Cover outside with colored contact paper. Put beans, sand, bottle caps, etc. in jars. Make a pair of each sound. Children listen and match.

III. Touching (Tactile)

A. Use brightly colored tissue paper to auditorily and visually stimulate the child as well as to tactily stimulate. Crunch the paper, wave it, tear it, etc.

B. Mountain - children can make a "mountain" of paper by crumpling up newspaper (bilateral hand activity) and putting into a pile. Afterwards they can play in it.

C. Tactile Sorting Cans - Collect several juice cans and line them, inside and outside, with self-adhesive, textured contact paper. This paper is available at most hardware and department stores. Recommended textures include burlap, ribbed corduroy, and contoured vinyl. Coarse sandpaper is another texture that can be used to cover the sorting cans. Next, cut heavy duty tagboard or cardboard into equal sized circles, squares, and triangles. Cover the geometric forms with the contact paper and sandpaper used to cover your sorting cans.

D. Children may rub their arms with dry and wet terry cloth towels. Can discuss rough-soft, wet-dry, etc.

E. Could make a Feely Box, with various objects and textures inside for child to feel.

F. Texture Cards - Make a pair of each texture - also, a texture book - velvet, sand paper, wood, burlap, sponge, etc. Children match by feel. Can put in a box - children reach in and find one that is like the one they have.

G. Fingerpainting and other ideas (See this Hand-out.)

H. Sandpaper shapes, colors also, numbers and letters (if the child is ready for them.)

IV. Taste (Gustatory)

A. Covered in cooking activities.

B. Accomplished each meal.

C. Can do units on fruits and vegetables testing. Can introduce new foods, such as coconut, papaya, etc.

D. Ask the child which foods are hard, soft, sour, sweet, salty, sticky? Can the child describe how a food item tastes?

V. Looking (Visual)

In all areas (see many activities in cognitive and communication.)

Comment: For tasting, touching, smelling and listening, the child could also be blindfolded for developing the ability to make finer discriminations.

PRESCHOOL SENSORY-IMPAIRED, MULTI-HANDICAPPED CHILDREN

Some handicapped children exhibit a great amount of disability. They are very dependent on those around them in order to get their needs met. A team approach in working with this child is of paramount importance. Some factors that should be considered when teaching this child are:

1. The teacher needs to work closely with the parents and therapists.

2. Proper positioning, handling, and feeding approaches are important. The child should change positions at regular intervals. The teacher should check with the physical therapist, occupational therapists, and speech therapists for techniques.

3. It is important to talk to the child. Since he may be non-verbal it can be easy to forget to talk to him.

4. Touch the child. Provide tactile experiences that will facilitate relaxation. If the teacher is relaxed, the child will also relax. Don't be afraid to touch the child.

5. Providing a multi-sensory approach may be good. However, stimulation for the sake of stimulation, may overload the child. "Grade" the stimulation for the child's level.

6. Establish consistent limits. Avoid letting the child completely control situations.

7. Maintenance is a vital part of the program. The teacher, in cooperation with the therapists, is trying to help the child to at least maintain his present status.

8. Get on the child's eye level. Strive to get eye contact with the child.

9. Establish realistic expectations based on the child's developmental levels. Provide success experiences at the child's functioning levels.

10. Provide movement experiences. (See next page).

11. If the child is upset, look for the causes behind the behavior. Is his belt too tight, gas pains, etc.

12. Keep data on each child, in order to give you feedback on how the child is doing toward IEP goals and objectives. It also gives you reinforcement on behavioral changes.

13. Utilize good judgement and safety procedures when working with the child. (one teacher did not put on a seat belt and the child fell out of the wheelchair and knocked out five permanent teeth).

14. Soft music can be soothing to the child and relaxing. Know what each child responds to.

15. Clean toys, mats, rugs, etc., on a regular basis for sanitation and health purposes.

16. Please refer to Sensory Activities and Five Senses hand-outs - Motor Section. Other ideas in this resource guide may be adaptable to the sensory-impaired, multi-handicapped child.

17. Respect each child's personhood.

** An effective teacher will develop a "give and take" relationship with the parents, physical and occupational therapist, speech therapist, etc., in order to plan the most optimal program for each sensory-impaired, multi-handicapped child.

*MOVEMENT

If a child does not move, what about helping him to do so? A few ideas are:

1). Swing child in a blanket - up, down, or sideways

2). Blanket pull rides on the floor

3). Cardboard box rides

4). Riding toys (hold onto him if he needs it for balance)

5). Scooter boards (hold onto him if he needs it for balance)

6). Rocking horse (hold on to him if he needs it for balance)

7). Fiber barrel. With the child inside, roll the barrel slowly. Position the child on the barrel and roll. Be sure he is in a good position. Have a proper hold on him when he is on the barrel.

8). Horsey rides (if child will be in a good position.)

9). With proper handling, carry child around room.

* Be sure and work closely with occupation and/or physical therapists to know if these are appropriate or not for the individual child.

CM

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Swimming Skills: Developmental Levels, Easter Seal Society for Alaskan Crippled Children - Adults, 624 W. International Airport Road, Suite 102, Anchorage, Alaska.

Check Local American Red Cross on Swimming or YMCA/YWCA.

Swimming for the Cerebral Palsied. Program Bulletin #10, U.C.P. Association, New York, NY.

(Please refer to the Evaluation Materials Section, as some of the sources have motor ideas.)

ADDITIONAL SOURCES OF YOUR CHOICE:

cognitive skills

Early Cognitive Development

Cognitive skills are rarely discussed without some reference to the theories of Jean Piaget. Piaget sees growth as progressing in an orderly manner through a series of predictable, observable stages (Hendrick, 1975). He outlined two major stages of intellectual development. Stages applying to children five years old and under are:

Sensorimotor Stages I and II (0-4 months)
The child participates in beginning sensorimotor adaptations and progresses from automatic or reflexive behavior to differentiation in responses. The child also repeats simple acts for their own sake, such as, opening and closing a fist.

Sensorimotor Stage III (4-8 months)
The child begins to make intentional moves toward pleasurable or stimulating goals, such as, arm swinging to activate a mobile.

Sensorimotor Stage IV (8-12 months)
The child actively anticipates the goals; activity becomes less generalized, more intentional and goal-directed, such as, kicking a pillow to obtain a toy hidden behind it.

Sensorimotor Stage V (12-18 months)
Active exploration and experimentation become evident. Experimentation is goal oriented, and child varies activities to obtain goals, such as, pushing down on the pillow now as well as kicks it.

Sensorimotor Stage VI (18-24 months)
Characterized by inventiveness and creativity. Most significantly, a primitive form of representation, or imagery is used in problem-solving. An example is: the child invents a way, not through trial and error, to accomplish a goal.

Only the first developmental stage in the second major Piagetian stage of Intellectual Development apply to young children.

Preoperational Thought (2-7 years)
During this time the child learns to use his multisensory experiences from previous periods and begins to internalize cognitive and symbolic manipulation of reality. At about age 4 the child begins to conceptualize more elaborately and construct more complex thoughts and images. For example: he can group objects into classes according to his perception of their similarities.

Although Piaget and his associates have documented these findings through careful research, when and how they are achieved will depend to a large extent on the quality of learning opportunities in the child's life.

From: Fallen, Nancy H. and McGovern, Jill E. Young Children with Special Needs. Columbus, Ohio: Charles Merrill, 1978. pp. 189-190.
Hendrick, Joanne. The Whole Child. St. Louis: C.V. Mosby 1975, p. 225.

Gagne's Hierarchy of Learning

Gagne is similar to Piaget in his belief that prerequisite skills must be acquired before new learning can occur. To determine entry levels, a child should be evaluated first to determine what prerequisites he has already mastered. This is where the teaching begins. Gagne has identified eight types of learning in his model, each type a prerequisite or building block for the one which follows.

1. Signal Learning
   The individual learns to make a general, diffuse response to a signal. Also, known as classified conditional response.

2. Stimulus - Response Learning
   The learner acquires a precise response to a discriminated stimulus.

3. Chaining
   A chain of two or more stimulus - response connections are acquired.

4. Verbal Association
   Acquiring of chains which are verbal. The conditions resemble those for other motor chains. This is a special type because of the presence of language in human beings. Internal links may be selected from the individuals previously learned repertoire of language.

5. Multiple Discrimination
   The individual learns to make different identifying responses to as many different stimuli which may resemble each other in physical appearance to a greater or lesser degree.

6. Concept Learning
   The learner acquires a capability of making a common response to a class of stimuli that may differ from each other widely in a physical appearance. He is able to make a response that identifies an entire class of objects or events.

7. Principle Learning (or Rule Learning)
   A principle is a chain of two or more concepts. It functions to control behavior in the manner suggested by a verbalized rule of the form "If A, then B" where A and B are concepts (must be distinguished from more verbal sequence "If A, then B" which may also be learned as Type (4) prerequisite for:

8. Problem Solving
   Two or more previously acquired principles are somehow combined to produce a new capability that can be shown to depend on a "higher order" principle.

From: Gagne, R. Essentials of Learning for Instruction. Hinsdale, Ill.: Dryden Press, 1974.

INFORMATION PROCESSING

Information processing skills are necessary for cognitive growth and the development of intellectual competency. The DARCEE skill development curriculum utilizes the following progression of skills. It offers a different way of looking at children's skills.

I. SENSORY SKILLS (OR "INPUT" SKILLS)
These processes must operate in order to receive and decode environmental stimuli. These skills consider all of the conceptual dimensions used by the major sense modalities: 1) visual 2) auditory 3) tactile-kinesthetic 4) gustatory-taste and 5) olfactory-smell. They have been ordered from the simple to the complex.

1. Orienting or Attentional Skill--This is the most primitive of sensory processes. A child learns to focus on stimuli in his environment. The teacher/parent should control stimuli in the child's environment to provide those which are relevant.

2. Discriminating Skill--perceiving similarities and differences among stimuli received by sensory modalities.

3. Relational Skill--child must deal with interrelated stimuli which occur simultaneously. An example is the child's ability to work a puzzle. He perceives the relationship among the parts and constructs the whole.

4. Sequential Skill--child learns to perceive a repeating pattern of stimuli which occur in a certain spatial or temporal order.

II. ABSTRACTING AND MEDIATING SKILLS (OR "ORGANIZATION" SKILLS)
These processes are critical in the assimilation of stimuli into a logical and orderly cognitive framework to facilitate retrieval of information and to foster the transfer of learning.

1. Conceptual and Association Skills--these occur concurrently. Initial emphasis is on developing awareness of the stimuli in the child's immediate environment through the child's observation and manipulation of concrete objects. Through frequent encounters with and exploration of objects, the child develops concepts of identity. As the child observes and manipulates the objects, the teacher, and later the child, labels the nominal and functional attributes which correspond to each object. The child learns, through association, to relate a label with each identity concept. Pictures of objects are introduced to encourage the child to relate the object with its representation and to associate the same nominal and functional labels with the representation as with the object itself.

   As Sensory Skills develop, attention is focused on additional, more formal attributes of objects. When the child is able to attend to relevant stimuli in his environment and has developed the ability to discriminate among stimuli perceived through the five sensory modalities, basic ordering concepts begin to develop based on the invariant conceptual dimensions used in the sensory ordering process.

The Basic Ordering Concepts include such concepts as color, shape, size, number, position, volume, texture, weight, temperature, motion, taste, time, age, and affect. As with nominal and functional concepts, the teacher labels each basic concept as it is perceived by the child. When the child can both recognize and identify a concept, every opportunity is taken to set the stage so that it is necessary for the child to use the label.

As the program progresses, the child's environment is expanded. New and different objects, concepts, and experiences continue to be presented to the child. Through association processes, the child develops meaningful relationships between objects, concepts, and events which are spatially, temporarily, or functionally related. He learns to associate labels with every object, attribute, representation, and symbol he encounters.

2. Classification Skills--develop through the process of association. During planned activities, the child is directed to associate or group certain objects or concepts which all share a particular characteristic to form a class of objects or concepts defined by the common characteristic. The child sorts objects first on the basis of attributes (nominal, functional, or basic ordering concepts such as color) and later on the basis of subordinate and superordinate relationships. The child learns to classify deductively by sorting objects with a common characteristic into their appropriate categories which are identified by the teacher. He then learns to classify indictively, by abstracting a shared characteristic of given objects or concepts and formulating the class defined by the common characteristic. Activities are sequenced to increase the amount of conceptual differentiation demanded of the child and to move the child from the classification of objects or concepts using concrete or representational materials to the classification of objects or concepts using verbal labels only.

3. Sequencing Skills--the tools used by the child to arrange concepts and experiences in a logical spatial or temporal order. These are the mediating skills utilized by the child in ordering motor and verbal responses when dramatizing the action patterns of stories or events; when executing a series of verbal directions; when verbalizing the serial order of numbers, days of the week, seasons of the year; and when verbalizing the sequence of episodes of familiar stories and events or activities which the child has experienced. Eventually the child utilizes this skill at a very abstract and complex level as he learns to develop his own stories exhibiting a sequence of events in a logical order.

4. Critical Thinking Skills--processes which are emphasized in the program when working with stories and problem situations. These are the very complex and abstract skills of drawing relationships, making inferences, analyzing problems, synthesizing ideas, hypothesizing, evaluating, drawing analogies, and analyzing absurdities. With the Abstracting and Mediating Skills, as with Sensory Skills, the curriculum is organized to develop increasingly more sophisticated

schemata for organizing information to encourage the continuous segmentation and differentiation of the child's cognitive field.

III. RESPONSE SKILLS (OR "OUTPUT" SKILLS)

The third division of information processing skills, Response Skills, can be called "Output" skills. These are the processes required to express, through both motor and verbal responses, the resultant product of the decoding and organizational processes. The curriculum for this process area is designed to develop the verbal and small motor coordination skills essential for self-expression and the effective communication of thought processes.

1. Verbal Response Skills--concerned with both quantity and quality of verbalization. Individual expression is reinforced with specific verbal praise, with physical gestures of approval, and, sometimes, with a concrete reward. Many activities are planned and many instructional devices are utilized to augment the quantity of verbalization. Conversation of child with teacher and child with child is encouraged particularly in small groups during the snack and lunch periods.

   Quality in verbalization is developed through the use of very carefully programmed reinforcement schedules to realize continuous improvements in articulation and in sentence structure. The child is reinforced for closer and closer approximations of complete sentence structure in encoding declarative (affirmative and negative) and interrogative statements. Lessons are planned whereby the child can develop the ability to use present, past, and future tense forms in actual situations. Certain sentence patterns are reinforced because they demonstrate evidence of complex thinking operations: negative statements used in classification activities to indicate objects or concepts which do not belong to a designated class; comparative statements used to describe the relationship between two objects exhibiting comparative forms of polar concepts of size, texture, weight, etc., "if-then" statements used to state deductions when certain qualifying conditions are given; statements with "or" used to imply choice. Succinctness of expression is developed by encouraging the child to reduce redundancy in consecutive sentences through consolidation of adjectives, verbs, and nouns using the coordinating conjunction "and".

   Use of "standard" grammatical forms and sentence patterns (a reflection of environment and thought process) is secondary in importance to the ability to use many variant forms employed in both the child's environment and a school-type situation. Since verbal expression is a primary method of communication as well as a tool and indicator of cognitive functioning, it is felt that the child should be able to comprehend and use alternative grammatical and structural forms. Without this versatility, comprehension handicaps and communication impediments might well develop with individuals from differing environments in later school-learning situations. (See Speech Therapist for ideas on this section.)

2. Motor Response Skills--deal primarily with the development of eye-hand coordination since these particular children tend to be extremely well coordinated in tasks involving gross motor skills. Again, as with Sensory Skills, classroom activities are sequenced throughout the program to refine coordination from the relatively gross control required in manipulating objects, modeling with clay, painting on large surfaces, drawing, stringing beads, and cutting to the fine control required in tracing, following dots, coloring in small areas, and printing.

The three Divisions of Information Processing Skills are interrelated and may overlap. The skills under each level are sequenced according to the way they appeal in development. This skill curriculum is based on previous research projects with disadvantaged three, four, and five year old children. The ideas may have relevance to any teacher working with preschool handicapped children.

From: Camp, Janet C. A Skill Development Curriculum for 3,4, and 5 Year Old Disadvantaged Children. Nashville, Tenn.: Demonstration and Research Center for Early Education, George Peabody College for Teachers, April, 1970 pp. 1-8. (Hand-out)

Cognitive: Teaching Ideas

Animals
Have children match animal pictures to each other. Could make a zoo and a barn. Have children determine which animal belongs where.

What's Missing?
Show children a picture of a person, etc. One part is missing. Ask children "What is missing?" Encourage them to describe the missing part.

Problem Solving
Work on anticipating needs in various situations.

a. If you were going on a trip, what would you take?
b. If you were going to clean the yard, what would you need?

Shopper's Bag
Invite parents to help collect pairs of socks of different colors and sizes. Place several pairs in a large shopping bag. Also include two matching Christmas stockings. A child removes the socks from the bag and matches them.

Weather
Teacher has a certain piece of clothing. Ask the children what weather it is worn in. Have several examples, such as, raincoat, mittens, swimsuit, boots, scarf, etc.

Nature Center
Container for collections of stones, shells, seed pods, cones, etc.

Counting
How many ways can this be worked in throughout the day? Use all practical ways you can think of.

Colors
One child is "it." He says, " I am thinking of an object in the room or near here, which is red," and so on. The others in turn name red objects, and the one who guesses correctly is next to choose an object. This game can also be used with foods. "I am thinking of a food that is yellow or brown," and so on. The person who guesses the food correctly chooses the next food. (older preschoolers)

Memory Skills
Ask children what happens first each day, second, etc. See if they can remember the entire schedule for the day. You can give them clues, if needed.

Playing Cards
Keep couple decks at school. Let children count numbers of hearts, etc. Can match cards. Keep number of cards to their ability level, or ones they're familiar with.

Cognitive: Teaching Ideas

Alphabet

Some children may be ready for learning the alphabet. Below are common objects that go with each letter. You may wish to make picture cards with the letters.

For Phonics

A--airplane, apple
B--ball, boat, bird
C--cat, cow, corn
D--duck, dog
E--egg, elephant
F--feather, fish
G--girl, gun
H--hat, horse, house, hammer
I--Indian, iron, ice cream
J--jelly, juggler
K--kite, king
L--lion
M--milk, monkey
N--nuts, nurse
O--orange
P--pigs, pumpkin, pencil
Q--queen
R--rabbit, ring
S--socks, star, spoon
T--telephone, television, toothbrush
U--umbrella
V--Valentine,vase
W--wheel, wagon, white
X--X-ray
Y--yellow, yarn
Z--zebra, zipper

Matched Forms

Draw on cardboard about eight shapes that are of similar but not exactly the same configuration. Color or decorate them alike. Cut out the shapes. On the inside of a manila file folder, trace around each shape with a felt marker. Place the decorated shapes in a small transparent bag inside the folder. The child places the decorated shapes on the corresponding outlined forms.

Puzzle

Paste a picture on a piece of cardboard. Have the child cut into 3-6 pieces to make a puzzle. You can keep in a large envelope.

Visual Discrimination

Take a piece of oak tag (12" x 12" or larger). Arrange a number of small objects on it--clothespin, key, bracelet, paper clip, small blocks. The objects should be small and flat and stable. With a felt tip marker trace around the objects. Collect them in a container and let the children solve the puzzle by placing each object on its outline.

Common Spatial Concepts

in-out
on-off
up-down
tall-short
over-under
beside
top-bottom
first-last
big-little
front-back
high-low
inside-outside

You can demonstrate the concepts or could set up an obstacle course and talk about them as the children go through the course.

Cognitive: Teaching Ideas

Magnifying Glass

Have children look at things with a magnifying glass. Examples are: grass, flower, their hand. Talk about what they see.

Shapes Family

In teaching shapes you could give shapes names and put faces on them to help children remember them. Examples are: Tracy Triangle, Rex Rectangle, Scotty Square, Celia Circle, and Dolly Diamond.

Which One Is Missing?

Put 3 common objects in front of children. Discuss them with children--names and functions. Have the children put their heads down (hide eyes). Remove one object. Tell children "Heads up" Ask which one's missing. Can be repeated. More objects can be added according to children's level.

Sorting

Use cupcake tin. Have children sort similar buttons and small objects, match to one already in cupcake tin. Could also paste shapes, colors, numbers, or bottoms of each one and children match with ones they have.

Listening Walk

Go on a listening walk. Talk about what you hear. Listen to sounds within classroom. Teacher could have children put heads down. Teacher then makes sounds and asks the children what they heard. Examples: snap fingers, clap, whistle, blow nose, cough, stamp feet, etc. Could also use objects - bells, shut door, alarm clock, etc.

Matching

Take shoe box and put colors on side. Color clothespins and children match to corresponding color on side of box. Could also do with numbers, shapes, etc.

Community Visitors

Invite nurse, fireman, policeman in to talk to children about what they do. Take a field trip to fire station, etc.

Counting

Numbers are everywhere! Have children count number of boys, girls; total number of windows; count cut outs; common objects or toys in classroom.

Cooking

Do simple cooking recipes. Have children measure correct amounts the recipe calls for, to emphasize counting and measurements.

Shapes

Talk about shapes. Have children find similar shapes in the classroom. For example, show them a circle--clock on wall is a circle, etc.

Juice

For juice time, have a jar of pennies. Let children "buy" their juice. They count out correct number for purchase. If toy cash register available, could "ring up" purchase.

Cognitive: Teaching Ideas

Magnets

Put a box together of assorted small objects. Include metal ones. Children can use magnet to see which ones they can pick up.

Science (Float-Sink)

Children make a sailboat out of the bottom of a paper cup. Small piece of play doh in bottom. Stick in a toothpick and paper sail. Talk about how it floats in water. Have rocks or heavy objects that sink.

Shapes

Have children cut out shape. They then paste on corresponding sheet.

Counting

Count objects in room. Children especially like objects they can touch as they count.

Balloon Game

Put one to two step directions inside balloons. Blow them up. Children pop balloon, get note and complete directions. Each child gets a turn. Example: jump up and down. Clap you hands. Teacher can read directions to child.

Matching

Have children match objects to pictures. Truck to picture of a truck, ball to ball, etc.

Health

Assemble in one area the following objects: a tissue, button, shoestring, boots, scarf, zipper. Assist the children in naming each object. Lead them in a discussion about habits involving the objects and how those habits might help prevent the catching or spreading of colds.

Wind

Have children blow pinwheel. Fill balloon full of air and let go. Have children blow on water spot on chalkboard. It disappears. Talk about wind and how it works. What other things can you think of? Fly a kite on a windy day.

Lids

Have several size plastic jars. Take off lids. Children match lids to correct jars.

Favorite Pet

Show pictures of different pets. Help the children identify the pets. Encourage the children who have pets to tell about them.

Spring

Take a spring walk. What do you see? What do you hear? Each child has a paper bag to collect treasures. After you get back to the classroom you can paste on paper for a collage.

Cognitive: Teaching Ideas

Plants

Take 2 plants. Put one inside a cupboard. Put the other by the window. In 2-3 days discuss why one grows and needs light vs. the shriveled up plant in cupboard. (Science)

Set Match

Math readiness. Make a kite out of pastel construction paper. Paste cardboard cross sticks on it. In one of the sections formed by the sticks, paste three identical paper dots. Place several identical paper dots in a small envelope. A child places dots in each of the other kite sections so that the number matches the number of the pasted dots. Make other kites containing different numbers of dots.

Science

Give each group of five or six children a couple of ice cubes in a foil pan. The children touch the cubes and think of ways to finish this sentence: Ice cubes are ______________.

Halloween (Seeing Sizes)

Make five jack-o'-lantern cutouts, ranging in size from smallest to largest. Make corresponding sets of ghosts (or other Halloween symbols), also ranging in size from smallest to largest (they don't have to be identical sizes). Place the cutouts in an activity center. The children then match up small with small, larger with larger, etc. You can key all the shapes on the back with numbers or geometric figures so that the children are able to check their work. For variation, have them try matching smallest with largest, etc. You don't have to limit to jack-o'-lanterns; can use circles, other object pictures, etc.

Color Facts

Perception. Display squares of red, white, orange and gray paper. Help the children identify each color. A child or group points to and identifies the color to help you tell the following: "The snowman was ______________. His scarf was ______________. The sun was ______________. The sun began to melt the snowman. Soon it grew colder. They sky turned ______________. It began to snow. And the snowman stopped melting."

Time

Name three things that children and adults do at different times of the day, such as: getting ready for bed, going to school, eating lunch. Have the children tell which one happens first, next and last. Encourage them to tell why they selected an activity for the first one; for the last one. Make simple line drawings or use magazine pictures, if possible, with this activity. Then have individuals arrange the pictures left to right in the order agreed upon by the class.

Don't Get Lost! Perception:

On a large piece of cardboard, construct a maze, using modeling clay as the boundries. Draw a dish of food at the end of the maze. A child moves a toy animal through the maze and tries to reach the food at the end.

Cognitive: Teaching Ideas

Move
Give each child a direction. See if they are listening and can correctly follow: Example: "Please walk behind the desk." or "I would like you to crawl under the chair."

Science (Cement)
Make cement using three cups of sand to one cup of cement and about 1/2 to 3/4 cup of water, depending on how wet the sand is. Pour the mixture into paper cups or cones and different shapes and sizes of boxes. Signs and handprints can be embedded in the wet mixture. The cement will harden overnight and can then be unmolded and used in the block area. Make sure the children only handle the cement mixture for a few minutes and that they wash their hands carefully afterwards.

Animals
Say the following poem: We want to go to the city. How will we get there? We'll go the way an (animal) goes. That's how we'll get there! Children fill in the blank with the name of an animal and the sound it makes.

Counting
Give children some toys, blocks, objects. Teacher has some. The teacher says, "I have 3 blocks, how many do you have?" Can work on counting, and teacher is active participant.

Same and Different
Draw faces on the chalkboard; all are the same but one. Have children find him ("One of the faces is different.") Can do this with toys, mimeographed sheets, etc. Could do with buttons, shapes, too.

Dimension and Form
1. Have children sort and match objects. Then have them do it blindfolded.
2. Have him copy something in a patterns. Then allow him to do it from memory. (block patterns, toys, pegs, lincoln logs)
3. Have child show you curves of letters.
4. Match letters, trace letters, sandpaper letters. Give child letters of his name and see if he can arrange them.

Science (Garden)
Plant garden in room. Take large tub filled with dirt; let children plant some vegetables. Talk about dirt; let children plant some vegetables. Talk about them as they grow. Talk about plants needing light, sun, water and air. Could let children take some home to add to their garden or let get big enough at school for a harvest. (Example: radishes, beans, etc.)

Numbers
Have number sheets and children paste correct number of circles, etc. for each number.

Matching
In a box put common shapes. Children reach in pull one out and match to shapes board. Ask children to name color and shape. Shapes board has outline of triangle, circle, rectangle and square.

Cognitive: Teaching Ideas

Name Puzzles

Childrens names are on paper (model). Duplicate one and cut in pieces. Children paste letters below one on paper in correct order.

Flake Mate

Cut out about four different pairs of large snowflake shapes. Paste each snowflake on a square of black construction paper. Place one pair of snowflakes on a table and include a snowflake from another pair. Have a child identify the two snowflakes that are alike. Continue the activity with different snowflakes.

Weight

Display the following on a table: a whole orange, half an orange, a whole banana, half a banana, a whole green pepper, a whole apple, a plastic apple (or other plastic fruit), a whole cucumber, half a cucumber, etc. Give the children copies of questions similar to the following: Which weighs more, the whole apple or the plastic apple? the half banana or the whole green pepper? Which weighs less, half an orange or the whole banana? the whole cucumber or the whole green pepper? At first, have the children respond to the questions after merely looking at the items. Then ask them to hold the items and answer the questions again. Invite a class discussion of the experiment.

Tactile Discrimination

Place these items in separate paper cups: long piece of yarn, cotton balls, gravel, sand, flower seeds, rice and pebbles. On separate four-inch cardboard squares, glue a piece of yarn, a cotton ball, gravel, sand, flower seeds, rice and pebbles. Have the child feel the contents in each cup, close his eyes, feel the surfaces of the cards and find the one that matches the contents of the cup.

Parts of Whole

On tagboard cards, draw the following pictures: a cart minus one wheel; a tree minus a major limb; a kite minus the tail. Make duplicate cards, cut around the outlines and cut the items into parts. Place the cards, the related cutouts and some unrelated cutouts in separate envelopes. The child selects an envelope and removes the card and puts with correct pictures. (association skills)

Can You Find It?

Decorate a shoe box and conceal a small object inside. Place the lid on the box. The children shake the box and listen to the sound the object makes. Challenge the children to find objects that they think are similar to the one whose sound they hear.

Place in a bag about 10 of these and other objects: ball, comb, small jar, toothbrush, spoon, small pill box, jack, etc. On 3 x 5-inch cards, make black silhouette drawing of the objects. A child selects a card, feels the objects in the bag and the child withdraws the object that matches.

Alphabet Letters

You can construct large letters from masonite. Children enjoy picking out the letters of their name.

Cognitive: Teaching Ideas

Soil

Bring in three jars each containing a different type of soil (black, rocky, sandy). Pour a portion of the soil from each of the jars in separate paper plates. Ask the children to feel the soils. Help them to determine their various characteristics (smooth, rocky, sandy, etc).

Balloon

To teach the concepts big-little, empty-full, use a balloon. Put air into demonstrate the concepts. Ask children to tell you if the balloon is big-little, empty-full. Other concepts equal blow, air, etc.

Lotto

Construct a lotto game. Take 8-10 pairs of pictures. Paste one on cardboard. Children match individual pictures to those on cardboard. Can use pictures for:

1. Common pictures, colors, or shapes.
2. Association skills - pictures of teeth - toothbrush pictures of hair - comb, etc.
3. Letters or numbers - if children are ready for it.
4. Can build in language development by talking with children about pictures as they match them.

Visual Discrimination and Memory Place objects on a table. Cover the objects. Ask child to guess what the objects are. Start with 2 objects and as the child's memory improves, work up to 5 or 6 objects. Place 3 or 4 objects on a table, have child observe, then close eyes, rearrange objects, have child open eyes and rearrange objects to original sequence. As child improves have him name from a group as - from a box of objects, you select three objects and put them behind a screen, lift the screen for a few seconds, let child see the objects on table behind screen, then replace screen, have child try to name the objects. Draw a shape, cover it up, then have child make one like it. Naming from memory objects in a group--put a group of objects in a jumble in the middle of the table for the child to see, after a few moments of observation, have child look away and name as many objects as possible. Have the child look around the room, then say, "Now close your eyes and tell me what you saw."

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(Please refer to the Evaluation Materials Section, as some of the sources have cognitive ideas.)

ADDITIONAL SOURCES OF YOUR CHOICE:

self-care skills

*SELF CARE

"But it is so much easier for me to do it. I'll wait until he is older and bigger until I worry about him being independent." Self help skills are not just learned over night when the child is older. Children with special needs must be guided and encouraged to learn and maintain these all important tasks. It is everyone's responsibility to enable a handicapped child to become as independent in caring for himself as possible. These children are entitled to achieve to their maximum potential. Children's self esteems are enhanced each time they learn a new skill that helps them be less dependent.

No matter how limited their abilities, there is usually some way to involve a child in feeding or dressing himself and in grooming activities. Involvement and participation helps them to feel that they are a part of the team and not simply a passive observer.

In order to help teach these basic skills each task must be broken down into small steps, so that one step at a time is learned. Reinforce as each step is mastered and give the child a chance to practice his new ability. Maintain a consistent approach and keep the directions simple.

The self help skills a child learns in the pre-school years may be the cornerstone upon which the child will continue to build his independence for adult life.

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*A thank you goes to Rose Landers, O.T.R. for compiling and writing the Self Care Section.

DRESSING AND UNDRESSING

There are many complex skills incorporated in the dressing/undressing process. Normal adults take for granted the ease in which they dress and undress, seldom considering the learning it required to master these skills.

In working with handicapped children one must realize that these skills may not come naturally as they do in normal children. Independent dressing is the culmination of many tasks, which may seem monumental to a child with special needs. The following recommendations should aid in teaching the mentally handicapped child. Occasionally an occupational or physical therapist may need to be consulted for additional help.

Readiness skills--before a child is able to undress and later dress independently the following are needed:

1) Reliable sitting balance
2) Functional use of one arm
3) Motor planning abilities
4) Awareness of body parts and his position in space
5) Awareness of what part of his body the different clothes go on

Assessment of the child's level of functioning and understanding must always be completed to determine where to begin in teaching these skills. Perhaps, work on the readiness skills will be indicated.

If the child has the pre-requisite skills, undressing is usually worked on first. Preferably this teaching is incorporated into play situations, with little pressure to perform certain skills, but with the childs attention focused on a fun activity.

Hula hoops and small rings are helpful in teaching a child to bring clothes over his head and to stick their arm or leg through a hole. Playing dress up is another invaluable tool for teaching dressing and undressing. Clothes used during dress up activities should be large enough so that they are easily removed and put back on. Using a mirror to help children see themselves increases the awareness of these activities.

Follow-through in the home is vital in reaching your goals for the child. Many of the skills are most easily learned when practiced at the normal time for undressing and dressing. Goals and approaches should be discussed with the parents so that consistency is maintained.

After the child is ready to practice on "real" clothes with you, it helps to expect him to do small steps at one time. It is best to teach the skills "backward", beginning with the child doing the last step of the sequence first. (See the handout for the steps involved in removing and putting on common garments.) Steps are gradually added to the sequence until the child has mastered the entire process.

Positive reinforcement is crucial after learning each new step. Do not pressure the child to learn faster than he is capable of doing. Use simple one word requests and be consistent in how you structure the learning periods. Incorporate as much fun as possible into the situations to maintain the child's interest.

Fasteners -

Learning to manipulate buttons and other fasteners requires much fine motor dexterity. The motions used to put coins in a piggy bank or cash register are required for buttoning and unbuttoning and are good readiness activities.

Unbuttoning should be taught first with large buttons and button holes. It is best to let the child practice with shirts that he has on his body. Using button boards etc. may tend to confuse children, since it is done from such a different perspective when in front of the child. Button boards are helpful for practicing motor skills but are not noted for carry-over to the "real thing."

One of the most practical rules to follow with children with decreased fine motor abilities is, when possible substitute garments without difficult fasteners, or to adapt them with Velcro (replacing buttons and zippers).

Loafers and other slip on shoes eliminate the need for lacing and tying bows. If lacing and shoe tying are appropriate goals, it is beneficial to use two different colors of laces while the child is learning these skills.

Cerebral Palsied and Multiply Handicapped Children -

Children with abnormal body tone and very limited physical abilities present a different problem from children with only mental handicaps. An occupational or physical therapist should always be consulted in planning dressing or undressing programs for these children.

Positioning to obtain maximum function is often the first consideration in these cases. Even if the child is totally dependent he should be placed in a position while being dressed and undressed so that he can see what is happening and the steps involved should be explained to him (such as, the shoe goes on your foot). Allow the child to help in any manner possible, even if it is just to pull the sock from his toes.

Adaptive equipment may be needed to help stabilize the child during dressing. Parents and professionals should refer to Handling the Young Cerebral/Palsied Child at Home by Nancie Finnie (included in the reading list). This includes excellent practical ideas for self help skills with physically handicapped children.

Independence may not always be a realistic goal for some children, but proper positioning may help to ease the parents work and enable the child to become more interested as he is dressed and undressed.

References: Campbell, Phillippa - Interfering Behaviors, Akron, Ohio (Handout)
American Journal of Occupational Therapy - Dressing Techniques for the Cerebral Palsied Child. Vol. VIII, No. 1 and 2, 1954

Sequential Steps in Undressing and Dressing

The following list gives recommended steps for helping handicapped children learn dressing and undressing. Undressing should be worked on first. Reinforcement and repitition are essential in order for the child to learn these skills. While working on these skills, assist the child with the first step and don't expect to move to the next one until he masters the less complicated one.

Takes Off T-Shirts

1. Removes T-shirt when shirt is pulled up around his neck
2. Removes T-shirt when the left arm is 1/2 way in the shirt
3. Removes T-shirt when left arm is in and right arm is out
4. Removes T-shirt when left arm is in and right arm is 1/2 way in shirt
5. Removes T-shirt when both arms are in the sleeves and shirt is pulled up to shoulder
6. Child removes T-shirt completely

Takes Off Jacket, Sweater or Button Shirt

1. Removes garment with one arm 1/2 way in a sleeve
2. Removes garment with one arm completely in sleeve
3. Removes garment with one arm completely in sleeve and one arm 1/2 way in other sleeve
4. Removes garment when pulled off shoulders
5. Removes complete garment

Takes Off Pants

1. Removes pants when one leg is removed with assistance
2. Removes pants when they are pulled to the ankles
3. Removes pants when they are pulled to the knees
4. Removes pants when they are pulled to the thighs
5. Removes pants

Takes Off Shoes

1. Removes shoes when 1/2 way off
2. Removes shoes when heel is slipped all the way out
3. Removes shoes when heel is slipped 1/2 way out of the shoe
4. Removes shoes (laces loosened)

Takes Off Socks

1. Removes sock from toes
2. Removes sock when it is pulled just below heel
3. Removes sock when it is pulled just above heel
4. Removes sock completely

Puts On T-Shirt

1. Puts on T-shirt when both arms are through sleeves
2. Puts on T-shirt when one arm is through sleeve and the other arm is 1/2 way in sleeve
3. Puts on T-shirt when one arm is through and other hand is at opening
4. Puts on T-shirt when lower arm is through sleeve
5. Puts on T-shirt when placed over head and with one hand to sleeve opening
6. Puts on T-shirt when placed over head
7. Puts on T-shirt when placed on head
8. Puts on T-shirt when placed on lap
9. Puts on T-shirt after being helped to unfold it
10. Puts on T-shirt after unfolding it

Puts On Jacket, Sweater Or Button Shirt

1. Puts on garment when right side is on shoulder and left arm is in above the elbow
2. Puts on garment when right side is on shoulder and left arm is in below the elbow
3. Puts on garment when right side is on shoulder and left hand is in sleeve
4. Puts on garment when arm is in sleeve
5. Puts on garment when right hand is 1/2 way in sleeve
6. Puts on garment when right hand is started into sleeve
7. Puts on jacket when guided to hold right side
8. Puts on garment when positioned beside him

Puts On Pants

1. Puts on pants when pulled to thighs
2. Puts on pants when pulled to knees
3. Puts on pants when both feet are put in pants, to the ankles
4. Puts on pants when one foot is in and the other is started in
5. Puts on pants when one foot is started in
6. Puts on pants when placed in front of him
7. Unfolds pants and puts them on

Puts On Shoes

1. Puts on shoe when heel is just started in
2. Puts on shoe with heel out
3. Puts on shoe when toes are 1/2 way in
4. Puts on shoe when toes are in opening
5. Puts shoe on correct foot when shoes are placed in front of him
6. Puts shoes on the correct foot when available to him

Puts On Sock

1. Puts on sock when it is just above heel
2. Puts on sock when it is just below heel
3. Puts on sock when toes are started in
4. Puts on sock when handed to him with heel in correct position
5. Puts on sock (heel in correct position)

Reference: Baldwin, Fredericks, Brodsky, Isn't It Time He Outgrew This
Springfield, Ill.; Charles C. Thomas

Suggestions To Help Eliminate Problems With Dressing

Problem	Possible Solutions
1) Difficulty putting arms through sleeves	-choose short sleeve shirts -raglan sleeves aren't as tight as regular ones
2) Difficulty getting head through neck hole on shirt	-avoid turtleneck shirts -slit T-shirts for 7" down front or back and apply velcro to close -wear button shirts
3) Difficulty with buttoning shirt, fastening pants hooks or snaps	-choose shirts with zippers part way down front -adapt buttons or hooks with velcro -choose shirts with large buttons
4) Difficulty pulling pants over braces	-cut pant legs up the inside to about knee height and snaps or velcro closing
5) Difficulty with elastic waistbands	-choose pants with regular waistbands
6) Difficulty manipulating belt buckles	-choose belts with cinch type fastening or pull through fastening

TOILET TRAINING

Toilet training is often viewed as a struggle between parent and child. However, if the timing is right this transition can be non-traumatic for all involved. One of the key points to insure success is patience--an endless amount of it. The following suggestions are designed to help parent, teachers and the child.

Physical Readiness Signs for Bowel Training:

1. Reliable sitting balance
2. Walking alone
3. Regularity of bowel movements
4. Ability to indicate discomfort with soiled diapers in some manner

Emotional Readiness:

Child is eager to please you and responds to your positive reinforcement- he enjoys winning your approval.

These signs usually occur during the second year of life, generally after 18 months. They may occur much later in mentally handicapped children. However, the procedures to follow in the actual training apply to both normal and handicapped children. Always consider the child's developmental level before attempting to train them.

Place the child on a small stable potty chair or use a small seat on the regular toilet. If using the regular stool provide a footrest for the child so that he feels secure. The chair should be left in the bathroom. Time it so he is on the chair about the time when he would regularly have a bowel movement. Limit the time on the potty to 5-10 minutes and DO NOT scold if there are no results. Scolding may hinder further progress.

Provide IMMEDIATE reinforcement for desired results. Choose the most appropriate and powerful reward for your child. Many children respond to charts with pictures of favorite toys or animals as rewards.

Maintain a casual relaxed attitude towards your child using the potty. The more that you try to force him to perform the more he may resist. Do not expect immediate success and keep in mind that accidents will happen. Punishment for accidents is detrimental and may cause the child to feel ashamed. Empty the "accidental" diaper into the potty chair if possible. A child's interest in his feces is very normal and should not be looked upon as dirty or naughty. However, appropriate limits must be set to deal with this curiosity.

Readiness for bladder training is indicated after the child is aware of wet diapers and can tell you that he has them. He must also be aware of when he is urinating and know the feeling of a full bladder. Generally if a child is able to stay dry for two hour periods it is time to start using the potty. Use training pants as soon as possible since diapers are for babies. Children should be able to pull their pants up and down so provide suitable clothing.

The same general rules apply to bowel and bladder training. We can suggest and encourage but we can not force a child to be trained. Patience and understanding are vital on the adults part.

If the child is enrolled in a program, it is helpful if the teacher and parents use the same terms for toileting and that consistency be maintained between school and home. Teachers and parents must both agree that toilet training is a priority for the child.

For non-verbal severely handicapped children every effort should be made to teach them a sign to indicate the need to use the toilet.

Severely involved children should also be clock trained to provide easier care for parents and caretakers. They should be placed on the potty after waking up in the morning, after meals and naps and before bedtime. Proper diet must be provided to maintain regularity.

Handicapped children should always be supplied with adapted potty chairs to maintain proper positioning while on the potty and to provide security for them.

References: Ross Laboratories, Columbus Ohio (pamphlets)

Feeding

Independent feeding should be a major goal for handicapped children whenever possible. Independence in this area provides satisfaction and freedom to the child and relieves the parent, teacher or caretaker of much work. When attempting to teach self feeding, repetition, routine and reinforcement are essential to achieve success. As with other self help skills, cerebral palsied and multiply handicapped children will most likely require the services of a physical, occupational or speech therapist to initiate the proper feeding program.

Self feeding programs--Pressuring a child to feed himself will most likely end in failure for both parent and child. The approach to teaching this skill must be relaxed but with appropriate and consistent limits.

Normal children begin to finger feed after they have mouthed objects for a period of time. This sensory exploration of their mouth and the motor pattern of bringing objects to the mouth prepare the way for self feeding. A pincer grasp must also be beginning before finger feeding occurs.

These readiness skills may have to be stimulated in the mentally retarded child. Careful assessment of what level the child is at must be performed prior to initiating a self feeding program.

As always consistency at home and school is vital. Parents and teacher must agree that self feeding is a major goal and everyone involved must approach it in the same manner.

If the child does not finger feed this is usually the place to begin. Provide a stable chair and table so that the child's feet are flat on the floor or footboard. If a high chair is used it must be a proper fit so that the child feels secure and comfortable. Present him with bite sized pieces of nutritious food. Initially you may need to give assistance by guiding his elbow. The food is a good reinforcement, however, your praise is also an added incentive to continue.

This is inevitably a messy stage and large bibs should always be provided. Do not be overly concerned with the food that ends up on the child's face, etc., but make sure that some does reach the mouth.

When the child progresses to spoon feeding proper equipment must be supplied. A scoop plate with a raised edge for easier scooping may be needed. Dycem, a non-skid material often helps to stabilize the plate on the table. Spoon handles may need to be built up for easier grasp or curved to help the child place it in his mouth. The therapist should have these resources available for you.

The following steps in teaching spoon feeding were determined after research (Berkowitz and Associates, 1971) conducted with seven severely retarded boys with mental ages of between one and two years old. Each step requires less help from the parent or teacher and more independence on the child's part. Appropriate reinforcement after each successful attempt is mandatory.

1) Aide, holding child's hand with spoon in child's hand, makes entire feeding cycle, from plate (scooping food) to mouth and back to plate.
2) Aide makes entire feeding cycle, but partially releases child's hand (still holding spoon with food on it) 2-3 inches below child's mouth. Child lifts spoon these last few inches himself.
3) Aide releases child's hand approximately six inches from child's mouth. Child lifts spoon about six inches.
4) Aide scoops food, releases child's hand at plate level. Child lifts spoon about six inches.
5) Aide brings child's hand to plate, releasing hand. Child scoops food, and lifts spoon to mouth.
6) Aide releases hand after child has emptied spoon. Child brings spoon down to plate, scoops food, and lifts to mouth.
7) Child executes entire self-feeding cycle by himself.

If the child is extremely distracted by other children he may need to be isolated during the initial phases of his training.

When teaching a child to drink from a cup, supply a very small amount of liquid at a time. Thicker liquids, such as apricot nectar, are usually easier to manage when first learning to drink. The cup should have 1 or 2 large handles, making it easier for the child to grasp. Spills will be numerous, but are a necessary part of learning.

Once these skills are mastered every effort should be made to help the child maintain his independence. Proper limits must be set, as with a normal child, concerning manners, etc. at the table.

Cerebral Palsied and Multiply Handicapped Children - Cerebral palsied and severely involved children pose more difficult problems when dealing with feeding. Feeding problems in an infant are often one of the first indications of a handicapping condition. Early intervention is crucial to prevent these problems from multiplying and causing more difficulties. The longer the bad habits and patterns are allowed to continue, the harder they are to remediate. Therapists have access to special feeding equipment, even for infants, to make feeding easier.

An occupational, physical or speech therapist must be consulted before attempting to remedy these children's feeding problems. The following is a brief summary of main points to remember when working with these special children.

1. Proper positioning while feeding severely involved children is the starting point when planning a program for them. Whether the child is held by the mother or is in a high chair he must be positioned so that his body tone is as normal as possible. Feeding often stimulates abnormal tone in a child's mouth, tongue and entire body. Since the entire body is involved, trunk, arms, legs and head position must be observed during feeding to determine the best position.
2. The problems in the oral area, due to abnormal reflexes and tone, must often be the focus of intense therapy before normal feeding may be possible. Your therapist may introduce a type of jaw control, performed by the parent or teacher, to help the child swallow better and to

decrease tongue thrust. These techniques should never be used indiscriminately. Each child has individual problems and must have individualized help.

3. The consistency of the food may have to be graded according to the child's ability to chew. Never give hard pieces of food or candy to the severely involved child.
4. Introduction of self feeding is often delayed or postponed since isolation of the movements required for it is usually difficult or impossible for these children. It is the decision of the therapist and parent as to whether independent feeding is a realistic goal. Children's ability should be reassessed at regular intervals to reassess such major decisions.
5. Even if independent feeding is never to be a major goal there is much help available to make meal times as pleasant as possible and a social experience, not a struggle.

Handling the Young Cerebral Palsied Child at Home by Nancie Finnie contains excellent suggestions for feeding Cerebral Palsied children and for positioning ideas.

References: Berkowitz and Associates - Teaching Self Feeding Skills To Profound Retardates Using Reinforcement and Feeding Procedure Behavior Therapy - 1971.

Finnie, Nancie "How To's on Dressing and Feeding", Reprinted from Handling the Young Cerebral Palsied Child At Home, U.S. Edited by Una Haynes.

Dental Care

Basic dental care routine remains the same for normal and handicapped children. Handicapped children may need special adaptions to the toothbrush or maximum assistance to get their teeth and gums really clean. The following guidelines should be followed:

(1) A child should visit a dentist within six months after they get the first tooth, no later than two years of age.

(2) Clean the baby's teeth with a cotton swab or a small washcloth. These materials may be soaked in a solution of soda water. A small toothbrush should be introduced around 2 years of age. Avoid forcing the use of a toothbrush since a child may be afraid of it. Introduce it gradually. Establish the habit of brushing teeth early, just as you do bathing and washing hair.

(3) Toothpaste is not mandatory for effectively cleaning teeth. Water, a good, soft, flat surfaced toothbrush and dental floss can do the complete job--if used appropriately. Toothpaste does give our breath a fresh taste and adds a little fluoride to the teeth.

(4) Provide children with proper diet, avoiding sugar, snack foods and drinks (see list under cooking section) as much as possible. Prevention is the key to success in maintaining a healthy mouth.

(5) Handicapped children should be provided with adapted toothbrushes to enable them to reach their mouth and all teeth easily. Toothbrush handles may be enlarged for a better grip (using bicycle handles, foam rubber, rubber ball, etc.) or extended to provide extra length.

(6) Electric toothbrushes may help some handicapped children since limited hand skills often prevent them from effectively moving the

toothbrush. At the same time the electric toothbrush massages the gums, which require as much attention as the teeth.

(7) If a handicapped child is unable to independently brush his teeth, parents should thoroughly clean the child's mouth at least once a day. The child must be properly positioned for the best results. Having the child seated with you standing behind him and supporting his head and jaw is often the best method to use (if physically handicapped he could be in his wheelchair.)

(8) Dental floss should be used regularly--this usually has to be done by the parents for pre-school children, although the children should later be taught to use it. This removes the unwanted plaque from between the teeth and tooth surfaces, that toothbrushes often miss. Floss holders are available to help make flossing your child's teeth easier.

(9) Please see Resource section for ways parents can locate a Dentist for their child.

References: Lancial, Lynette A Guide to Oral Dental Care for the Disabled, Iowa City, Iowa.

United Cerebral Palsy Association (Una Haynes Edition) "How To's" On Dressing and Feeding from Nancie Finnie Book.

Self-Help Activities

In addition to the ideas in the other self-help hand-outs, here are a few more:

1. Each child could have his own toothbrush, and hairbrush or comb for personal grooming.
2. Children enjoy putting on hand lotion (pre-washing activity.)
3. Encourage children to pour their own juice with a small pitcher or clear measuring cup. Encourage them to pick up their toys and assist with clean up. (Early work habits.)
4. Children enjoy putting on perfume and/or after shave (pre-washing activity.)
5. Putting on and taking off a hand puppet (pre-dressing.)
6. Discussions about cleanliness, safety, dressing, etc., with the children are beneficial.
7. Putting a scarf inside a child's sleeve and child gets it out (pre-dressing.)
8. Washing dolls and dishes during water play (pre-washing.)
9. Terry cloth glove over child's hand can help him in bathing and washing skills, especially if there are limitations with hand skills.
10. Fingerpainting - (pre-washing activity.)
11. Sensory Activities (of all kinds) - Provide early self-care experiences (See Hand-outs in Motor section.)
12. Gather gloves or mittens in a box. Children can play with them during play time (dressing.)
13. Putting on and taking off clothespins from coffee can (pre-dressing.)
14. Unraveling yarn from around your body (pre-dressing.)

SELF-CARE: READING GUIDE

Coley, I.L. Pediatric Assessment of Self Care Activities. C.V. Mosby, St. Louis, 1978.

Dressing Techniques-for the Cerebral Palsied Child. United Cerebral Palsy Association, Inc., 66 E. 34th St., NY, 1954.

Finnie, N. Handling the Young Cerebral Palsied Child at Home. E.P.Dutton, New York, (1975).

Foxx, Azrin. Toilet Training In Less Than A Day. Simon and Schuster, 1974.

Foxx and Azrin. Toilet Training the Retarded. Research Press Co., Champaign, IL.

Gallender, D. Teaching Eating and Toileting Skills to the Multi-Handicapped in the School Setting. Charles Thomas, Springifled, IL, 1979.

Nathan, Carol. Please Help Us Help Ourselves. Inexpensive adapted equipment for the handicapped. University Medical Center, C.P. Clinic, Indianapolis, Indiana.

Ricci, D.P. A Training Handbook for Severely and Moderately Retarded Children in Self Help Skills. Unified School District No. 1., Kenosha, Wisconsin. (Printed by Wisconsin Department of Public Instruction, Madison.)

Robinault, I.P. Functional Aids for the Multiply Handicapped. Harper Row Publishers, Inc., Hagerstown, Maryland.

Training for Independence. DLM, 7440 Natchez Ave., Niles, IL, 1979. (Fundamental self-care and functional training for daily living units.)

Step-by-Step Dressing by Shirley Henderson and Mary McDonald. Edmarks Associates, Bellevue, Washington.

Toilet Training. Baker, Bruce et al. Skills Training Series. Edmark Associates, Bellevue, Washington, 1979.

ADDITIONAL SOURCES OF YOUR CHOICE:

social skills

SOCIAL SKILLS

"Why do children need to learn social skills?" Some adults really question the value of including social skills in a preschool handicapped curriculum. However, it is also a common occurence to hear adults sometimes complaining about their colleagues. Surveys have indicated that one of the primary reasons for people changing or losing jobs is because of their inability to get along with fellow workers. The social skills needed to survive as an adult are not learned SUDDENLY--they are learned over a period of many years and thousands of experiences with others. By exposing children early to positive social interactions, it is felt that these early habits will become a permanent part of the child's repertoire of behaviors. How a child feels about himself will be a part of his self-concept, and this will definitely affect how he lives his life and relates to others.

Albert Einstein said, "We are all together, and yet so all alone." Why not help the future citizens of tomorrow avoid having to feel that way? Early social experiences come through what some call "child's's work" better known as play.

As infants, children are basically interested in fulfillment of needs. They seek immediate gratification and derive pleasure from the use of the senses. From infancy through middle toddlerhood (about 2 1/2 - 3 years old), the child is on a solitary play level. They do not share, and want to play by themselves.

After a period of time, one may observe the child moving near another child's territory. The child may play near another child, side by side with the same toys, but there is not yet a social exchange or sharing process. This is called parallel play.

The day comes when the child wants to be a part of a play situation with another child. There may be bumps, tears, tug o' wars, and other associated behaviors that are a normal part of the cooperative play stage. Sharing, waiting, problem-solving, and taking turns are sometimes hard to accomplish, especially when the child wants to do something NOW. However, with practice the child can learn the self-control needed to achieve these early social ammenities. At the same time, the child learns how to express feelings, develop perceptions of himself based on peer interaction, and formulates social values.

The effective educator will build into the daily schedule opportunities for the children to play. The environment is carefully designed so as to facilitate, rather than inhibit social development. The teacher will also take opportunities to positively reinforce children who are playing well together. At times, the teacher will be a part of the play. (example: pretends to be sick and the children as doctors take care of the teacher). Since play is a child's "natural way of working and learning" the teacher will skillfully weave additional learning opportunities into the child's play--to assist him in the organization, interpretation and exploration of his world.

Social skill development in the early years is indeed the harbinger of the child's life as an adult. It is too important to overlook and must be an integral part of the curriculum.

DEVELOPING SOCIAL SKILLS IN CHILDREN

BABIES...

..are already social creatures. They enjoy other people but cannot empathize. They:

*watch, smile and "perform" for familiar people but are fearful of strangers

*need to receive lots of love before they can give it

*have no concept of ownership and reach for everything they see

*think everyone feels the same way they do

*"talk" through cries, gestures, and expressions

YOU CAN...

...provide babies with their first satisfying social experiences:

*encourage friendliness by talking and playing with babies; be present when different adults and children visit.

*give lots of love and attention-this does not "spoil" babies.

*put things that belong to other people out of babies' reach; let them explore other safe objects.

*teach consideration by treating babies with tenderness and responding to their feelings.

*respond to babies' "talk" and speak to them at every opportunity.

TODDLERS...

...continue to reach out to people, but their first attempts are often awkward. They:

*play alone or next to other children but need to check in on parents occasionally

*cannot share easily

*tend to hit, push and poke to get things they want and hold onto what is theirs

*can't take other people's point of view, but begin to try to please parents

*can use words and simple sentences

YOU CAN...

...encourage and support children's efforts, but don't expect too much too soon:

*invite other children into the home; take toddlers to parks where there are other children; start a play-group so toddlers can play with other children.

*show toddlers how to share with others, but don't force them to share; provide them with their own toys and storage boxes.

*help children to protect what's theirs, but stop hitting and pushing; teach children to use words instead.

*begin to teach toddlers simple rules and routines such as touching people gently; praise them often when they follow rules.

*tell toddlers what to do and why in simple direct language.

PRESCHOOLERS...	YOU CAN...
...can work together with people, and become more selective about their friends. They:	...help children get along with their widening circle of friends:
*gradually learn to play with other children and make friends	*continue to give preschoolers regular experiences with different adults and children.
*learn to understand the idea of sharing and taking turns	*teach these skills through your own example; tell children how they should act and why.
*begin to use words rather than physical force to get what they want and protect their possessions	*continue to encourage children to use words rather than hitting or grabbing.
*learn to "read" others' feelings, pretend to be other people, and become more considerate of other people	*help preschoolers notice and interpret feelings; tell children how they can show consideration for others.
*are able through increased language to express their feelings and get along with other people	*talk with preschoolers about their experiences and help them recognize their feelings.

From: Footsteps - A Television Series on Parenting. Washington, D.C.: National Audio-Visual Center, General Services Administration, 1978.

Self-Image

Self-image is the way a child perceives himself and the way he thinks other people perceive him. There are many activities for enhancing a child's self-image in the classroom. Below are some of the common techniques and activities that may be employed by the teacher:

Techniques:

1. Establishing realistic expectations and consistent limits for the children. This enables them to feel secure, and more positive in the classroom. Use of positive reinforcement when children behave appropriately. (Refer to Behavior Problems hand-out in Behavioral Management Section).

2. A positive learning environment in which the teacher has carefully designed the environment for maximal effects (See: Is Your Classroom Doing What It's Supposed To Do? Hand-out in Evaluation Materials Section).

3. Providing child with a variety of positive experiences.

4. Positive teacher model. Adults serve as mirrors, for children.

5. Opportunities for children to discuss or act out their feelings and ideas.

6. Allowing children to make choices when you really want them to have one. (Example: Do you want juice or milk at snack time?)

7. The children's papers are displayed in the classroom.

8. Each person's name is important to them. Using the child's name tells them you recognize that there name is important.

9. Children feel good about doing jobs in the classroom (watering plants, clean up, calendar, etc.)

10. Did you offer a positive greeting to the child when he entered the classroom?

Activities:

1. Drawing around the child's body on butcher (brown) paper. Child can draw in the clothing and facial parts. Other variations could be: a) draw over two sheets of paper and stuff newspaper between, staple edges for a large stuffed doll (idea from Joan McGrath and Jan Shawver, preschool teachers), b) could cut body into pieces and children assemble a giant puzzle.

2. Body Parts - a) Children point to body parts with their eyes closed. b) Put tape on various body parts and children pull off.

3. Faces -a) Drawing or painting pictures of people and faces on paper or paper plates. b) Making face puppet on paper plate -stapple to popsicle stick or tongue depressor. c) Give child head and body parts. Child pastes facial parts on the head to make a face.

4. Mirrors - a) Children do shaving cream painting on the mirror. b) Make various facial expressions while looking in mirror. c) Dress up in front of mirror.

Human feelings are just as important as "things" and "concepts." (Anderson, 1976).

5. Doing songs, fingerplays and poems about body parts (see People and Their Bodies included in Songs, Fingerplays, and Poems Hand-out in Communication Section).

6. Acting out feelings to music or in play. Could also have children do pantomiming.

7. Books - Could make any or all of the following: a) All About Me, b) Family and Friends, c) Toys, d) Feel Book of Textures, e) Animals, f) Shapes, g) Colors, etc.

8. Fingerpainting - a) Make prints of hands and/or feet, b) thumbprints, c) face paint (See Recipes in Sensory Activities Hand-out in Motor Section).

9. Shadows - a) Using projector have child stand or sit by wall. Put paper behind his head and trace outline of head. Have children guess who is who by outline. b) Shadows outside - children look at and try to touch. Could also play shadow tag. c) Stretch a sheet on the wall and turn on projector. Children make animals, wave, etc.

10. Children bring favorite toys from home and can tell class about them. Bring photos from home. Also, can share "news" with the class of new experiences at home.

11. Have a "special person day." Children pick out a special adult and wear badges that say "____________ is our special friend." The next day each child has a badge with their own name on it "I am Special." A variety of fun activities and games can be a part of Special Days (activity by Joan McGrath and Jan Shawver, preschool teachers).

12. Puppets - Children can make puppets. Can use to act out feelings and ideas.

13. Who's missing? - In a group, children put heads down. Teacher picks a child and covers with a blanket. Teacher then says heads up and ask "Who is missing?" Children guess who is under the blanket.

14. Mobiles - Take outline of child's head (#9 Activity) hands and feet (#8 Activity), and add a string to each. Then tie to a hanger for a mobile.

15. Using cloth tape make a giant person on the floor. Children throw bean bags on various body parts or are asked to "step on the person's head, arm, etc."

16. Play - Children exhibit many feelings and attitudes during play each day.

17. Acting Out Feelings - Examples: How would you feel if someone gave you a ferocious lion? If someone hit you? If you fell down on a sidewalk? If you ate too much?

18. Birthdays - They are special to children. Celebrating them at school make children feel good.

19. Rings, Necklaces, Happy Notes - Children enjoy receiving and/or making rings and necklaces. Happy notes are "smiley faces" that are given out when children have done something well. It is another way to let them know.

20. Cut out a felt star. Add masking tape on the back. Now make it stick to various body parts. Try to shake it off. Children name body part it is stuck to.

21. Adapting Dolls - They can wear hearing aids, helmet, eye patch, braces, etc. A cardboard box can be made into a wheelchair. This helps point out individual differences, and may help a child to relate to a doll that is like him. Also, opens up avenues for discussion of feelings and attitudes.

"Children value themselves to the degree they have been valued." (Briggs, 1970).

HOMEMADE TOYS AND GAMES

The toys on this list will provide hours of fun for children. Battery operated toys which only do one or two things soon lose their appeal to children. The adult can have fun making the toys/games. It is also fun to play with the child as he uses the new creations.

Puzzles: Glue a magazine picture on a piece of cardboard. Cut the puzzle into pieces - a few or many, depending on the child's ability.

Paper Chains: For this activity, use strips of paper approximately 1 inch wide by 6 inches long. Glue the ends of one strip together to form a loop. Continue to add loops to form a chain.

Music Everywhere: Musical instruments can easily be made from items found around the home. Some ideas are:

> Triangle: Bend a hanger into a diamond-like shape. Hold by the hook and strike with a pencil.
>
> Drum: Hit a pan or can with a pencil (or spoon). An old oatmeal box makes a good drum.
>
> Tambourine: Between two paper plates (or pie tins), place rice. (pebbles, macaroni, etc.). Tape together. Tap with your hand or shake.

Use these to have the child imitate rhythms, to be in pretend band.

Home-made Formbox. Take a large empty coffee can. Cut a round hole, square hole and triangle hole in the plastic top. Use a thread spool for the round hole, a square wood block for the square hole and cut a square wood block in half for the triangle.

Placement: Cut slits into a heavy piece of paper (or tagboard). Weave strips of paper by putting the paper over and under the slits.

The We Book: Construct a simple scrapbook of paper, or buy an inexpensive ready-made one. Have the child fill the pages by coloring, drawing, or cutting and pasting pictures in his book. Include pages such as, "Members of My Family", "My Favorite Toys", "Things I Like to do Best", "My Pets", etc.

Pegboard Set: Accoustical tile and golf tees.

Sewing Cards: Picture from coloring book pasted to cardboard - punch holes and yarn used for lacing.

Playdough: 1 cup flour, 1/2 cup salt, and 1/2 cup water or until right consistency. (Excellent!)

Milk Carton Blocks: slide one opened, clean carton into another to form a block. You can cover with colored contact paper or construction paper. Large Blocks - can be made from shoeboxes taped shut.

S

Bean Bags: can use different colors or shapes of fabrics, easy to sew.

Treasure Bag: Fill with small, interesting items such as magnet, magnifying glass, drawing pencils, and pads of paper.

Picture Lotto: Cut pictures from magazine and place on one piece of cardboard. Cut identical pictures from another magazine and glue each on a small piece of cardboard. Have the child place the single pictures on top of the picture that it matches on the large card.

Color Dominoes: Set of cards colored as follows:

R-R Y-Y B-B G-G
R-B Y-R B-Y G-B
R-G Y-G B-R G-Y
R-Y Y-B B-G G-R

This activity helps to reinforce color names, and is an enjoyable game for those who already know their colors.

Feely Box: Cut a hole 3" diameter on one side of a shoe box. Let the child decorate the box however he wishes. Place several familiar objects in the box. Have the preschooler reach in and find the object asked for.

Sound Cans: Six identical containers with lids (margarine tubs, sherbet containers, orange juice cans, etc.) Using three of the following: (rice, macaroni, sand, rocks, paper clips, cereal, pennies, buttons, unpopped popcorn) Divide each material into two cans, making 3 sets. Give one can of each set to the child and keep one for yourself. Have him listen as you shake one of yours. Then have him find the one that sounds the same.

Shape Sorter: Use margarine tubs with lids--cut one shape in each lid and cut out paper shapes to fit into each tub.

Size Tubes: Use toilet paper or towel rolls--cut into different lengths, and sequence from shortest to tallest.

Bingo: Cards may be used for shapes, colors, alphabet, or numbers

Sorting Tray: Use muffin pan or egg carton for tray--use paper clips, pins, rubber bands, buttons, pieces of paper, etc.--can sort according to shape size, color, heavy/light, composition, etc.

Puzzle Game: Outline different objects on piece of paper or tagboard. Have your child place the object on the outline of the object.

Pull Toy: Can be made from oatmeal box or egg carton and spools--attach strings so the preschooler can pull the toy behind him.

Fishing Pole: Dowel rod or bamboo pole 2-3 feet long; string for fishing line with magnet tied to end. You can cut fish from colored paper and put paper clips on them. The child can then go fishing!

Finger Puppets: Cut the fingers out of old gloves. Add eyes, nose, mouth, ears, hair.

Sock Puppets: Stuff old socks, to form people or animal puppets. The face can be sewn or drawn on with marking pen or magic marker.

Mitten Puppets: When one mitten is lost, its partner can become a puppet! One lost mitten? Why not use the partner for a puppet.

Paper Sack Puppets: Stuff a paper sack with newspaper, and tie the opening, leaving several inches for the handle. Draw facial features and hair. Add fabric clothing.

Paper Plates: Two paper plates, mounted with a pencil can be decorated with crayon, yarn and fabric to make an easy puppet.

Compiled By: Karin Mullen, Beth Underbakke, Betty Wetzbarger, Decorah Preschool Handicapped Programs.

SOURCES FOR HOMEMADE TOYS/GAMES:

Cole, Haas, Bushnell and Weinberger. I Saw a Purple Cow. Northfield, Ill.: PAR Project, 464 Central Ave. Zip 60093 ($6.95) Paperback ($2.95)

Cole, Haas, Heller and Weinberger. Recipes for Fun and More Recipes for Fun. Northfield, Ill.: PAR Project, 464 Central Ave., 1972.

Eilers, Linda. Everything and the Kitchen Sink: Ideas for Making Toys from Household Items. and You Can Make It, You Can Do It. (toy patterns) Macomb, Ill.: Macomb 0-3 Project, Western Illinois University 1977.

Homemade Developmental Toys and Activities. (toy ideas) Alaska Head Start Special Services Project, Anchorage: Easter Seal Society, 1974.

Monahan, Robert. Free and Inexpensive Materials for Preschool and Early Childhood. Belmont, Calif.: Lear Siegler, Inc., Fearon Publishers, 6 Davis Dr. Zip 94002, 1973.

Author: You. Ideas From Your Own Imagination

Play Activities

There are unlimited dimensions to the number of available activites for young children. With a dab of imagination and a dash of creativity, children can make many situations or materials into a fun, learning experience. Below are some activities preschool children enjoy:

1. Housekeeping Area - (an all-time favorite)
   Children enjoy playing house, having tea parties, playing with dolls, cooking, etc. It is quite common to observe children modeling adult behaviors through their play. Children will rehearse adult roles, and play a number of characters and personalities. (Are you setting the kind of model you want them to act out in their play?)

2. Dress Up Clothes - These are a must in the housekeeping corner. A child can be a policeman one minute and a farmer the next. Providing a variety of clothes, hats, purses, adult shoes, etc., allow the child flexibility. People such as fireman, doctor (toy doctor kit is great fun), nurse, mailman, dentist, clerk, family members, etc., may suddenly appear in the classroom through the magic of creative dramatics.

3. Boxes - become a T.V., jail, zoo, barn, house, store, a hiding place, tunnel, train, boat, airplane, a monster's house, bus, helicopter, etc. Children will enjoy painting the box. Giving the children the flexibility to use it as they wish enhances creativity and social interactions.

4. Blocks - are a basic item to the classroom. They can build anything from an ant house to the Empire State Building. Children can work together to construct various structures. It's also fun to load them up and haul them around.

5. Why not let the children make: a play grocery store, beauty parlor, zoo, farm, office, space ship, print shop, city, campsite (tents are fun from a card table covered with a blanket), T.V. studio, etc.? You can encourage them to plan the idea and assist with transforming a part of the room into a new learning experience.

6. Acting Out Stories - The teacher can read the children a favorite story; then encourage them to act out the story. Let them make their own story interpretations. It is sometimes fun to pretend to be an animal or a bird. It is also fun to act out songs, fingerplays and poems. (See Communication Section).

7. Magic Carpet - a rug becomes a "magic carpet" and takes the children to places of their choice.

8. Puppets - They come alive with little hands inside of them; they can express many feelings, values, and can do many impossible feats.

9. Water, Sand Play, Fingerpainting - (favorites) Children love to play in these sensory media. The wonder of their imaginations may amaze you at the number of things sand, water, fingerpaint can do or can become. (Refer to Sensory Activities Hand-outs in the Motor Section for recipes and ideas).

10. Empty purses, lunch boxes, suitcases, paper bags, colored laundry bags. They can hold anything from blocks to dress up clothes to "monsters" to dried up play dough. Children really enjoy sorting, filling, dumping, pouring, etc., with these items.

11. Games and Art - These are enjoyed by all preschoolers. There are many opportunities for social interaction and self-confidence building as children participate in them.

*Children should have the freedom and be allowed to play with "boy and girl" toys. Adults should avoid stereotyping some toys as only good for one sex.

Universal Needs of All Preschool Children

Children come in all sizes, shapes, and colors--each with his own endowments, voice, fingerprints, and feelings. Each is a unique individual who learns and develops according to his own physical, mental, and emotional endowments, his own cultural and environmental experiences, and at his own rate. Although some children have specific needs depending on their own particular endowments, all have the following basic needs:

1. An enriched, stimulating environment in which he can move.
2. Time to explore, discover, and organize information gleaned from his excursions.
3. Motivating materials to encourage active involvement in the learning process and to help him understand his environment.
4. Success in a hurry.
5. Play--self absorbed, socializing, imaginative, role playing.
6. Respect--acceptance for what he is and approval.
7. Responsible direction and challenge to do his best.
8. Free choice--giving form and substance to his capabilities, and practice in decision making.
9. Help in determining his own behavior; building on privileges.
10. A place he can call his own; secret places into which he can curl.

From: Zimmerman, L.D., and Calovini, Gloria. Toys as learning Materials for Preschool Children. In Exceptional Children May, 1971, 32(9) 642-654.

Games

Games are fun and give children a feeling of self-confidence through participating in them. There are also many opportunities for socializing, expressing feelings and learning more about their world.

1. Pin-The-Tail On The Donkey - Child is blindfolded and attempts to pin the tail on a donkey picture. Can be adapted to put leaves on tree (Fall), feathers on turkey, ornaments on evergreen tree, hearts on a giant valentine, pin nose on the Jack O' Lantern, etc.

2. Hide n' Seek - old favorite. Children can play this during free time or play time. Can also hide specific objects, such as, bean bags and children find them.

3. Duck, Duck, Goose - (An All Time Favorite) - Children make a circle and sit down. One child is chosen, walks around the outside of the circle and taps children lightly on the head saying "Duck", until he/she chooses one child and says "Goose". The "Goose" tries to catch the child before he/she gets around the circle and back to the empty spot. If caught, the child becomes "duck soup" and can go into center of the circle for one turn. Be sure all children have a turn. Children can run after each other or could be played so they crawl after each other. Another variation of duck, duck, goose is Number 4, below. Also, you can play by having the child who is it walk around the circle and drop a handkerchief behind chosen child (Drop the Hankie.)

4. Pop Goes The Weasel - materials: small blanket. This is a game for the whole family or entire class. Sit in circle formation. Then begin with the song. The person who is "it" will carry the blanket around the circle with him. When the song gets to the word POP, the person who is it drops the blanket on the head of the nearest person. The one under the blanket is to pull the blanket off his head and begin to choose the person who is "it" around the circle. All around the cobbler's bench the monkey chased the weasel. The monkey thought it all in fun, POP!! Goes the Weasel!!

5. Bowling - can purchase a plastic bowling set. Other variations are: (a) use quart size milk carton and rubber ball, (b) get middle-sized empty box and set up on its side against a wall. Children roll the ball into the box or (c) build towers with large cardboard blocks, bowl them over.

6. Beach Ball Volley Ball - use a large beach ball. Children form a circle and bat and push ball back and forth. Great Fun!

7. Musical Chairs - Can play using chairs. Children walk around them until the music stops. Then all must sit down. There is one chair less than the number of children and so each time one child is eliminated. The winner is the last remaining child. Variations: (a) musical boxes - use colored sheets of paper taped to floor, child could crawl around as music plays, (b) children each come to circle with favorite toy. Each time one toy is removed. Children hold a toy or touch one when music stops, (c) for parties can have hearts, leaves, turkeys, rabbits, etc., pictures taped to floor, children get on one when music stops and tell you the number or letter, (e) use cardboard boxes, children walk around them and jump in when music stops, or (f) use small hoola hoops.

8. Balloon Pop - children are all seated on two sides of a "lane" or empty space, parallel to each other. Two children are picked to go to starting line at beginning of lane between the two lines of children. They run to finish line and sit on a baloon to pop it. Could also have children crawl from one end to the other. (Note: Adults can be on end and assist stubborn balloons by keeping a thumb tack handy).

* All children should have a chance to participate in each game.

9. Roll the Ball - Children form a circle and sit down. They roll a ball back and forth to each other. Be sure all children get a turn, or pass the ball around to music. Stop when the music stops.

* Are the children having fun? Are the adults having fun?

10. Bean Bag Toss -a board with three different size holes is set up, and the object of the game is to toss a bean bag through the holes. Variations: (a) make taped shapes, number on the floor. Children toss bean bags on them and tell what they are, (b) throw bean bags into containers or cardboard boxes, or (c) if slippery floor slide bean bags along to knock over bowling pins.

* Children should not feel pressured to "win". The most important goal is active participation by the children.

11. Giant Games - Could make a giant Candyland game. Put large squares of paper on floor in a pattern in classroom. Children are the moving pieces. Adult spins a bowling pin spinner with small pictures of each of large pictures in a circle. Children take turns and move to appropriate picture. Could also make faces with all different moods. (happy, sad, mad, crying, frightened, etc.) Place in pattern throughout the room on the floor. Play as suggested above.

12. Treasure Hunt - clues are hidden in room or outside. Children start with one clue. Adult reads and children follow to another clue. Finally, at end of a sequence of directives, children find the treasure. Can make clues rhyme or contain riddles, which children must answer before finding out location of next clue. Variation: follow colored foot prints to various clues.

13. Scavenger Hunt - children divided into two or three groups, with an adult to each group. Each group given a list of 10-12 things they must gather. Time limit established and game begins. Group that finishes first wins, but all children receive a prize or treat.

14. Fishing - use dowel rods or short bamboo poles, with string and magnet. Have paper clip fish and children "go fishin". Note: Monitor so no one gets hit with fishing pole.

15. Parachute - children each hold on the edge of the parachute with adults interspersed throughout. Make it go up and down. A couple children could go under and stay when it is down. When it goes up children run out. Place balls on top of the parachute and shake them off. Endless number of variations. If a prachute is not available, a large sheet or a large blanket could be used.

16. Red Light-Green Light - Children go from starting line to finish line. Teacher says "green light" and they run. When teacher says "red light" they

must stop. Last one to stop on "red light" starts over. Could also use a whistle. They run until whistle blows and must stop.

17. Parade - children can dress up and march around the room to music. Could also have a circus parade with children dressed as clowns, lions, elephants, etc.

18. Doggy, Doggy, Where's Your Bone? One child is the dog. He barks to the other children. He is sleepy and takes his bone or stick and puts it behind him, facing away from the class. He hides his eyes. Another child comes up and takes his stick or bone. Everyone closes their hands in front of them. The children then call to the dog, "Doggy, Doggy, Where's Your Bone?" The dog turns around and chooses the one he thinks has his bone. He says "(child's name). Do you have my bone?" Continue until he finds the one who took his bone. This child then becomes the dog, and game repeats as above.

19. Chair Ring Toss: Children toss jar rubbers at the legs of a chair that has been turned upside down.

20. Bottle Ring Toss: Six pop bottles are set up to form a triangle. Children toss jar rubbers at the bottles.

21. Follow the Leader - child is the leader. He does something, such as, jump, roll, clap, tap head, march around room, etc. Children follow the leader.

22. Simon Says - child is the leader. He gives various commands with "Simon Says" attached to beginning of directive. If he leaves out the words "Simon Says" children should not do the directive.

23. Follow the Whistle - The teacher walks around the room blowing a whistle. The child, while being blindfolded, attempts to follow the sound. The walking area should be free from obstructions.

24. Relays - children form two lines. On the words "go" first two of each line run from starting line to finish line and back again. They touch next child in line, who then runs. Game continues until all children in each line have had a turn. Could also have a roll relay.

25. Drop the Clothespins - children take turns dropping clothespins into gallon size plastic milk jugs. Could also use containers with wider mouths, or small boxes.

* Sharing, waiting, taking turns and following directions are important goals of all games.

26. Kitten and the Ball: Children are seated in a large circle with one child, the "kitten," in the center. A ball is rolled back and forth across the circle. "Kitten" tries to catch it. The children try to keep him from catching the ball by throwing it quickly and changing direction frequently. When "kitten" catches, the ball, he may choose a new "kitten."

27. Balloon Play - Several balloons are blown up, and tied. Children hit them to keep in the air. Could take a string and tie balloon to child's arm. Child shakes balloon in time to music. If having a party, hang a sheet from lights, fill up with balloons, during the party, pull one edge of the sheet to

shower the children with balloons. Note: monitor carefully; children do not put balloons in mouth. Could cause choking.

28. Ping Pong Bounce: Bounce ping pong balls into the box. Could also play with rubber balls.

29. Surprise Bag - Fill a bag with familiar objects, and call it "Our Surprise Bag." Let a child place his hand into the bag and select an object by feeling. Let him display the object and tell all he can about it. Could also have small presents. Each child gets a turn to reach in fcr a present.

30. Pinata: A pinata is good fun for a party. A simple one may be made by stuffing a medium-size paper bag with candy, trinkets, and small toys mixed with shredded paper or confetti. Hang from ceiling at slightly above child's eye level. Each child uses a stick and gets 2-3 turns, and tries to break it. Note: Adult should carefully monitor so no one gets hit with the stick.

A-B-C's of Inexpensive Home Fun

A is for animal tracks - take some plaster of paris with you on nature hikes and you can preserve imprints forever.

B is for boxes of all sizes and shapes - tiny ones can be made into doll-house furniture, a large one into a boat and an appliance crate into a play-house.

C is for clothes for the "dress-up" drawer - save hats, purses, blouses, aprons, shoes, a string of beads.

D is for dough - mix salt. flour and water and it will be ready for patting, squeezing, rolling and "baking."

E is for extras - extra odds and ends such as buttons, rick-rack, pop-bottle caps, bias tape, glitter, bits of ribbon are fun for stringing, for pasting, for decorating doll cothes.

F is for food coloring - to make the bath water become a blue ocean or milk a rosy pink, add a drop of coloring.

G is for gunny sack - fill it with straw and sawdust, hang to a tree and you'll have a punching bag.

H is for hats - painter's, firemen's, policemen's, derby, feather or flowered hats are loved by preschoolers.

I is for innertube - to roll, to sit in for a rocket, or used as a container for bean-bag toss.

J is for jumping mats - an old mattress, old car seat or just a hole in the backyard filled with or sand can be fun for active legs.

K is for knitted rope - knot every 12" to 18" and securely tie to a tree for a rope ladder swing.

L is for lumber of all sorts - an oak plank can be turned into a board slide or with cleats, even a teeter-totter.

M is for macaroni - try alphabet, shell, flat, and crinkly, or long and skinny macaroni for painting, stringing or pasting into collage creations.

N is for newspapers - just right for disposable aprons and of course, paper mache'.

O is for old blankets - perfect for covering a card table or the clothes lines to make a very private "house."

P is for plastic - squeeze bottles, freezer containers, wastebaskets - anything of unbreakable plastic.

Q is for questions - take time to answer them or hunt up the replies if you don't know.

R is for rubber hose - a 4 foot length can become an elephant's trunk, a fireman's hose or a gas pump line.

S is for old sheets and pillow cases - dye them your favorite colors and they'll be ready to be doll clothes, curtains for a puppet stage or background material for a cloth mural.

T is for a tree-stump - along with a child-sized hammer and some nails for hammering, pulling out and hammering in again.

U is for utensils - spoons, pots and pans (free from rust), a muffin tin and strainer make for fun in the sandbox or washtub.

V is for vise - to hold the wood securely while your young carpenter hammers and saws.

W is for water - children enjoy "painting" with water and large brushes, floating boats in it and running through it.

X is for Xmas cards - save old ones for convalescing or rainy days and your children will have fun standing them in a row, sorting them by color and pasting them into a scrap book.

Y is for you - your attention, your time, your interest, your laughter, your guidance.

Z is for zoo - in miniature, made from cardboard boxes and nursery cast-off "animals."

From: Make Toys at Home. Ames, Iowa: Extension Service, Iowa State University, Feb., 1964. (No. HD62). Each County Extension Office has many other pamphlets, and Hand-outs available on preschool.

PLANNING GUIDE FOR INTEGRATING A PRESCHOOL HANDICAPPED CHILD INTO A REGULAR SETTING

An imperative part of the Federal Law P.L. 94-142 states that handicapped children are entitled to a "free, appropriate public education" in the "least restrictive environment." For some handicapped children this means they will be educated with non-handicapped. What kind of planning is done to insure that the child will have maximum opportunities to be successful in a regular setting? The following set of questions are designed to facilitate good planning.

I. ASSESSMENT

--What skills, strengths and needs does the child possess?
--Are the parents and regular education teacher a part of all planning?
--Is there a reasonable teacher-pupil ratio?
--Will support services, such as speech therapy, physical therapy, etc. be available if they are needed? (team approach)
--Can the child participate in all activities? If not, which ones?
--Are there ideas available for the regular education teacher to use if classmates tease or misunderstand the child?

II. ATTITUDE

--What is the teacher's attitude toward handicapped children? The staff's? The parent's? Other parent's? The child's classmates?
--What is the child's attitude toward himself?

III. INSERVICE

--Will inservices be offered for the teacher, staff, other parents, etc.?
--If an aid is needed for the child, will this person receive training?

IV. TRANSPORTATION

--Have all details been worked out for transporting the child?
--If the child will need a safety vest, has this been ordered?

V. ADAPTATIONS

--If the child needs adapted equipment/materials, has this been ordered?
--Have any potential architectural barriers been removed or altered?
--Has consideration been given if the child will need assistance or adaptations for toileting and feeding?

VI. SUPPORT/FOLLOW-UP

--If support services are needed, what kind and how frequently?
--Will there be ongoing inservices throughout the school year for teacher, aid, other staff, other parents, etc.?
--Will the support service professionals be available to give planning ideas and to help with programming?

VII. COMMENT

**All planning and decisions should be done in the best interest of the child. Will the child have the opportunity to be a successful, growing member of the class?

SOCIAL/PLAY: READING GUIDE

Sharp, E. Thinking is Child's Play. E.P. Dutton and Co., NY, 1969.

Skill and Concept Activities: For Threes and Fours Learning Activities. Parent-Child Early Education, Ferguson-Florissant School District, 655 January Avenue, Fergusson, MO.

Smilansky, S. The Effects of Sociodramatic Play on Disadvantaged Preschool Children. Wiley, NY, 1968.

Smith, L.I. et al. Behavioral Prescription Guide, Manual IIc: Social, Parent/Child Home Stimulation. The Marshalltown Project., Marshalltown, Iowa, AEA #6, 1973.

Sprung, Barbara. Non-Sexist Education for Young Children: A Practical Guide. Citation Press, New York, 1975. $3.25.

Water, Sand, and Mud as Play Materials. NAEYC, Washington, D.C.

Wehman, Paul. Helping the Mentally Retarded Acquire Play Skills: A Behavioral Approach. Springfield, Illinois: Charles Thomas, 1977.

Winn, and Porcher. The Playgroup Book. MacMillan Co., NY.

Young, Leontine. Life Among the Giants - A Child's View of the Grown Up World McGraw Hill Book Co., NY, 1965.

(Please refer to the Evaluation Materials section as some of the sources have social/play ideas.)

ADDITONAL SOURCES OF YOUR CHOICE:

SOCIAL/PLAY: READING GUIDE

Anderson, Zola. Getting a Head Start on Social-Emotional Growth. Meyer Rehabilitation Institute, Omaha, Nebraska.

Axline, Virginia. Debs in Search of Self. Ballantine Books, NY, 1964.

Axline, Birginia M. Play Therapy. Ballantine Books, New York, NY, 1947.

Bailey, Donald B, Toby L. Klein and Anne R. Sanford. A Model for Resource Services to the Young Handicapped Child in a Public School Setting. Kaplan School Supply Corporation, Winston-Salem, North Carolina, 1974.

Boston children's Hospital. What To Do When "There's Nothing To Do." Delacorte Press, Boston, Mass.

Briggs, Dorothy C. Your Child's Self Esteem. Doubleday and Co. Inc., Garden City, NY, 1975.

Broad and Butterworth. The Playgroup Handbook. St. Martins Press, NY, 1974.

Carlson, B. and Ginglend, D. Play Activities For The Retarded Child. Abingdon Press, Nashville, 1961.

Cherry, C. Creative Play For The Developing Child: Early Lifehood Education Through Play. Fearon Publishers, Belmont, CA, 1976.

Hartley, R.E. et al. The Complete Book of Children's Play. Columbia University Press, New York, 1960.

Hartley, R.E. Frank, L.K. and Goldenson, R.M. Understanding Children's Play. Columbia University Press, NY, 1962.

Martin, G. J. and Hoben, M. Supporting Visually Impaired Students in the Mainstream. CEC, Reston, VA, 1977.

Moustakas, Clark. Children in Play Therapy. Ballantine Books, New York, NY, 1953.

Piaget, J. The Construction of Reality in the Child. Ballantine Books, NY, 1954.

Piaget, J. Play, Dreams, and Imitation in Childhood. Humanities Press, New York, 1952.

Piers, M. Play and Development: A Symposium. W. W. Norton, NY, 1972.

Piers, Maria W. ed. Play as Development. W. W. Norton and Co., New York, 1972.

Roedell, W.C. et al. Social Development in Young Children: A Report for Teachers. Department of HEW, National Institute of Education, Washington, D.C., 1976.

Sanford, Anne, Barbara Semrau, and David Wilson. The Chapel Hill Model for Training Head Start Personnel in Mainstreaming Handicapped Children. Kaplan School Supply Corporation, Winston-Salem, N.C., 1974.

RESOURCES/REFERENCES

R/R

1979-80 Preschool Handicapped Services In AEA One

*Keystone Area Education services are offered to all handicapped children and students between birth and twenty-one in the eight counties in Northeast Iowa. These counties include: Howard, Winneshiek, Allamakee, Chickasaw, Clayton, Fayette, Delaware and Dubuque.

Local Education Agency (LEA) Center-based Preschool Handicapped Programs:

*Numbers after Teacher's Name = Teacher's DPI Folder No.

Decorah Preschool
Location: Abner Hendrickson School 382-5157
305 Montgomery, Decorah, Iowa 52101
Head Teacher/Coordinator: Dennis Fisher
Preschool Teacher: Beth Underbakke (189791)
Preschool Teacher: Karin Mullen (194309)

Dubuque Preschools
Location: Franklin School 557-2717
39 Bluff, Dubuque, Iowa 52001
Principal: Lesley Stephens
Preschool Teachers: John Heinrichs (S/P classroom) (196584)
Corinne McCullough (S/P Classroom) (178394)
Location: Marshall Elementary School 557-2727
1450 Rhomberg, Dubuque, Iowa 52001
Principal: Charles W. Reed
Preschool Teacher: Joan McGrath (179314)
Location: Sullivan School 557-2753
1025 Davis, Dubuque, Iowa 52001
Principal: Lesley Stephens
Preschool Teacher: Donna Shaw (S/P Classroom) (196259)
Location: Eisenhower School 557-2718
Principal: Fred C. Smith
Preschool Teachers: Deb Burke (188071)
Sue Davis (199716) (Also teaches at Marshall School)

Farley Preschool
Location: Farley Elementary School 874-2295
Farley, Iowa 52046
Principal: Thomas Wickham
Preschool Teacher: Brenda Ekdon (196965)

Manchester Preschool
Location: Lambert Elementary School 927-3515
1001 Doctor St., Manchester, Iowa 52057
Principal: George Cabalka
Preschool Teacher: Pam Sturms (191417)

Hazleton Preschool
Location: Hazleton Elementary School 636-2379
Hazleton, Iowa 50641
Principal: Terry O'Neil
Preschool Teacher: Cheryl Kelley (184485)

Monona Preschool
Location: Monona Elementary School 539-2031
Monona, Iowa 52159
Principal: Roger Swanson
Preschool Teacher: Greta Donlon (201627)

Services: Multi-disability classrooms for preschool children who have a diagnosed handicapped by a team of professionals or the Diagnostic Clinics. Most children are between 2 1/2 - 5 years of age. Parent involvement is encouraged. Most programs also include a home-based instructional component. There are 3 preschool programs for severely-profoundly handicapped.

Preschool Handicapped Consultants for Keystone Area Education Agency

Paul Lenger (319-588-0538)
Conlin Building
1473 Central Avenue, Dubuque, Iowa 52001

Bill Landers
Keystone AEA 1
R.R. 1, Box 330A
Elkader, Iowa 52043
(319-245-1480)

Services: Consultation/technical assistance to LEA Center Base Preschool Programs, AEA Project CHILD, Home-based programs, and Diagnostic Clinics.

AEA PROJECT CHILD HOME-BASED TEACHERS

Paige Shreve (184888)
Office: Dubuque (319-588-0538)
School District Served: Dubuque

Karen Brummel (201121)
Office: Farley (319-744-3309)
School Districts Served: Western Dubuque
Dubuque

Debbie Krueger (165048)
Office: Manchester (319-927-2143)
School Districts Served: West Delaware
Maquoketa Valley
Ed-Co
Starmont
Oelwein

R/R

AEA PROJECT CHILD HOME-BASED TEACHERS (Cont.)

Deb Daley (195361)
Office: Elkader (319-245-1480)
School Districts Served: Central
Guttenberg
Garnavillo
M-F-L
Mar-Mac
Valley
Postville

Karen Bonte (168729)
Office: West Union (319-422-5678)
School District Served: Fayette
North Fayette
Turkey Valley
Fredericksburg
New Hampton
West Central
Valley

Marcia Boberg (182156)
Office: Decorah (319-382-2870)
School Districts Served: Decorah
Eastern Allamakee
Allamakee
South Winneshiek
North Winneshiek
Howard Winneshiek
Riceville

Contact Person: Mr. Raymond C. DeNeve, Assistant Director - Support Services, Keystone Area Education Agency (319-245-1480), Elkader, Iowa 52043

Services: Home-based instructional program in which the parents play an active part as the child's primary teacher. If available, physical therapy, occupational therapy, speech therapy, and/or social work services are also part of the child's and family's home program. This program serves children from zero to five years of age, who have a diagnosed handicapping condition. Each AEA home-based preschool teacher has a toy lending library. Toys and educational materials are loaned to parents of young handicapped children, whom they serve.

Diagnostic Centers

Service: In-depth educational evaluations on preschool age and school age youngsters. Diagnostic teams assist parents, teachers, and school staff in handling children with problems requiring special equipment or additional professional assistance.
Location: Dubuque Center, Second Floor Conlin Building, 1473 Central Avenue, Dubuque, Iowa 52001 Ph. 319-588-0538. Decorah Center, Claiborne Dr., Decorah, Iowa 52101 ph. 319-382-2870

Professional Support Services

There are speech therapists, occupational therapists, physical therapists, psychologists, audiologists, and social workers assigned throughout the Area Education Agency. A special education nurse is also a part of the preschool handicapped services in Dubuque. There is an M.D. available for medical consultation and psychiatrists for psychiatric services for each Diagnostic Clinic.

Films, tapes, multi-media, etc. are available to teachers. They can be obtained from:

Media Services Division (319-245-1480)
Keystone Area Education Agency
Elkader, Iowa 52043

Also, information searches can be obtained. These are called: INFORMS (Iowa Network for Obtaining Resource Materials for Schools).

Contact: Mike Hayford (319-245-1480)
Media Services Division
Keystone Area Education Agency
Elkader, Iowa 52043

Selected Organizations

Area Residential Care Inc. 319-556-7560, 2909 Kaufmann Ave., Dubuque, IA 52001 - 8:30 A.M. - 4:30 P.M.

AEA #1 Counties Served: Dubuque, Delaware, and Clayton Counties

Services: The following services are available to mentally retarded and developmentally disabled citizens of the above counties.

Residential Service, Vocational Services, Adult Training Center, Trace, V.I.P. (Vocationally Improved Program), and Support Services.

Fees: Contact local county Department of Social Services.

Child Abuse and Neglect Resource Center

Institute of Child Behavior and Development, The University of Iowa, Oakdale, IA 52319 319-343-4791

*Area: States of Iowa, Kansas, Missouri and Nebraska

Services: Offer technical assistance for neglected children and their families by working with local professionals, AEA's, schools, and communities. They do not work directly with families, but offer information and consultation to the people dealing with the families. They will help agencies develop inservices; offer information to the legislature; offer information available through computer from DHEW on the latest research on child abuse and neglect. They can also consult on specific cases with local professionals.

Child Development Clinic

University Hospital School, The University Of Iowa, Iowa City, IA 52242
For Information Contact: 319-353-4825
Hours: 8:00 A.M. - 4:30 P.M. (By appointment only)
Area Served: State of Iowa

Services: The primary role of the Child Development Clinic is to serve as a diagnostic clinic for developmental, learning, and behavioral problems in children. The clinic will provide a comprehensive study of any child under 18 years of age who has problems in the following areas. (1) development; (2) speech and language; (3) poor school performance or learning disability; (4) hyperactivity; (5) mild behavior problems; (6) psychological problems associated with medical conditions. Once the problems are delineated, the child is referred to his personal physician and the resources of the local community with appropriate recommendations. Serves 0-18 year olds. Referrals for clinic appointments may be made by physicians or, in special cases, by the Area Education Agency.

Fees: Financial arrangements are the same as for any other department of University Hospitals. Contact your local social service office for details and help in this area.

Official Papers Required: After the initial referral is made, forms are sent to the parents, schools, and agencies involved with the child. These forms must be completed and returned to the clinic before the clinic appointment.

Cooperative Extension Service

For Information Contact: County Offices:

Allamakee-21 Allamakee St.
Waukon, IA 52172

Clayton-133 E. Main
Elkader, IA 52043

Dubuque-120 Bryant
Dubuque, IA 52001

Howard-211 N. Elm
Cresco, IA 52136

Chickasaw-102 East Main St.
New Hampton, IA 50659

Delaware-115 E. Delaware
Manchester, IA 52057

Fayette-614 S. Main
Fayette, IA 52142

Winneshiek-Box 67
Decorah, IA 52101

Phone number: 800-262-3804

Services: The Cooperative Extension Service is the largest most successful informal educational organization in the world. It is a nationwide system funded and guided by a partnership of federal, state, and local governments that delivers information to help people help themselves through the land grant university system. Extension carries out programs in the broad categories of: agriculture, natural resources and environment, home ecomonics, 4-H, and other youth and community resource development.

Eligibility: Any person with problems relating to agriculture, community, home and family.

Services: Develops programs to remediate problems in the following areas: parenting, nutrition, family resources, and energy conservation. Also, has an abundance of pamphlets on child rearing and preschool children.

Answer Line (see phone number) will answer questions all hours of the day on family, home, community, etc.

Department of Social Services

For Information Contact: Individual County Department of Social Services

Allamakee - Court House, Waukon, IA 52172 - 319-568-4583
Chickasaw - Box 8, 122 N. Chestnut, New Hampton, IA 50659 - 515-394-4315
Clayton - Clayton County Office Bldg., 429 High Street, N.E. Elkader, IA 52043 - 319-245-1766
Delaware - 711 West Main St., Manchester, IA 52057 - 319-927-4512
Dubuque - 1473 Central Ave., Dubuque, IA 52001 - 319-588-2041
Fayette - 116 South Vine, West Union 52175 - 319-422-5634
Howard - 205 E. Second St., Box 117, Cresco, IA 52136 - 319-547-2860
Winneshiek - Box 286, Decorah, IA 52101 - 319-382-2928

Services: Income Maintenance Program

1. Food Stamps
2. Aid to Families with Dependent Children. Program includes Medicaid coverage and referral for training programs.
3. Medicaid coverage for SSI recipients. Payment for nursing home placements.

4. County Relief: Payment of fuel, food, and rent in emergencies. Payment of medical bills and Iowa City Hospital payment.

Services Programs

1. Services to families: Foster Care, Marital Counseling, Adoption, Day Care, and Family Planning Referrals.
2. Services to handicapped children, placement, case planning and financing.
3. Services to Aged: Chore Program, Homemaker Service, Family Life Homes, In Home Nursing Program, and placement and services to nursing homes.
4. Services to Handicapped Adults: Placement in appropriate programs, case planning, financing.
5. Services to youth in training schools.
6. Services to any person in need of protection.

Eligibility:
Income maintenance programs: Resource and income limitations for food stamps, AFDC, and nursing home payments. Each program varies.

Service programs: Any person receiving assistance is eligible for all needed services. For any person not on assistance, eligibility is determined by specific income guidelines. Protective Services (Child Abuse) are provided without regard to income eligibility.

Resident Requirement: Person must be living in the State of Iowa.

Fee: There is a sliding scale fee for homemaker service, foster care, and nursing home payments. All other services are free.

Serving Northeast Iowa:

Easter Seal Society for Crippled Children and Adults of Iowa, Inc.
P. O. Box 4002, Des Moines, Iowa 50333 (515)289-1933

For Information Contact:

Easter Seal Society
22 1/2 S. Frederick Ave., Oelwein, IA 50662, Phone number 319-283-2190

Services: Medical equipment is available on loan for as long as is needed, at no charge to the client. A simple Basic Information Form must be completed by the client and their physician. Equipment most often requested and available for loan and purchase assistance includes: wheelchairs, glideabout chairs, flotation pads, Hogg chairs, walkers, hospital beds and mattresses, bed rails, trapeze bars, overbed tables, APP Units, patient lifters, commodes, elevated toilet seats, toilet safety rails, bathtub grab bars, bathtub seats, crutches, exercycles, and suction machines. All maintenance, repair and shipping costs for Easter Seal equipment on loan are paid by the Society. The Easter Seal Society also purchases physical, speech and occupational therapy, braces, prosthetics, ramps, and driving controls.

Eligibility: None. The Easter Seal Society attempts to meet the needs of disabled people who, because of the high cost of services, equipment, etc., find themselves unable to afford the help from their own financial resources. No fees. Medicare and/or medicaid cards if available.

Family Planning
Northeast Iowa Community Action, 212 Winnebago St., Box 30, Decorah, IA 52101

For Information Contact: 382-9263

Hours: 8:00 A.M. - 4:30 P.M.

Area Served: Allamakee, Bremer, Clayton, Fayette, Howard and Winnishiek

Services: Funds provide for physical exams, lab tests, contraceptives, information education and counseling. There are no funds for sterilization or abortions. Minors will be served in compliance with the Supreme Court ruling. Arrangements can be made to see local family planning doctors through NEICAC outreach, or clinic appointments can be made directly by calling: Elgin Clinic - 426-5584, Oelwein Clinic - 283-5174.
Eligibility: Any person requesting service.
Fee: None for low-income patients; sliding scale for others.
Official Papers Required: Income verification, social security number.

Hillcrest Family Services
2005 Asbury Road, P. O. Box 1160, Dubuque, IA 52001

For Information Contact: 319-583-7359

Hours: Phone answered 24 hours/day

Area Served: State of Iowa, Main Office - Dubuque, Branch Offices - Cedar Rapids and Des Moines

Services: Adoption, Single parents, family, marriage and individual counseling; family life education, family planning, residential treatment centers for adolescents and women, community services and consultation.

Eligibility: Services to those in need; not dependent upon residency requirements.

Fees: Adoption, single parents and counseling program fees based on sliding fee schedule. Residential treatment program fees based on purchase-of-service with Department of Social Services.

Official Papers Required: Not applicable for counseling. Residential treatment programs admission requirements outlined in intake process.

Hills and Dales Child Development Center, Inc.
1011 Davis St., Dubuque, IA 52001 (556-7878) Hours: 8:30 A.M. - 5:00 P.M. (M-F)

Area Served: There are no geographic limitations on the area served. However, residents of Dubuque County and Social Service District VIII are served first and second respectively.

Services: Hills and Dales Child Development Center provides residential services to handicapped children. Each child's program is individually prescribed drawing from the following service offerings: 24-hour nursing care; physical therapy; occupational therapy; positioning therapy; self-help skills training; recreational services; and social work.

Eligibility: Any person who is non-ambulatory and between the ages of birth to 18 years is eligible for application.

Fees: A parent/guardian who is interested in placing their child at Hills and Dales should contact their county Department of Social Services to apply for assistance in meeting the costs. Social Security Number and Health Insurance papers are asked for (if available). These papers are not mandatory.

Iowa Commission for the Blind
Fourth & Keosauqua Way, Des Moines, IA 50309

For Information Contact: 515-283-2601

Area Served: State of Iowa

Services: Complete library service, including provision of talking book machines, talking book records, cassette players, tapes, and braille books. Orientation and adjustment center training. Center is located in Des Moines and provides braille, travel, typing, shop, homemaking, personal grooming, and particular emphasis on attitudes and philosophy of blindness. Home teaching (for persons unable to attend the center). Vocational rehabilitation. Makes available aids and appliances, such as canes, slates and styluses, needle threaders, signature guides, corrugated writing boards, watches, timers, measuring devices, cooking aids and more. Some items are available without cost. Endeavors to disseminate the right kinds of public information. Also utilizes civic groups to achieve the above ends.

Fees: Based on individual need and situation.

Iowa State Services for Crippled Children
Medical Records Center, The University of Iowa, Iowa City, IA 52242

For Information Contact: Clinic Appointments 319-353-5428
Patient services after clinics 319-353-5773

Hours: 8:00 A.M. - 4:30 P.M.

Area Served: State of Iowa

Services: Clinics held throughout the state provide a wide range of diagnostic services for chronic or recurrent disease and disorders. General clinics are staffed by specialists in pediatrics, orthopedics, educational and clinical psychology, speech pathology, audiology, physical therapy and at selected clinics by ophthalmology. Ear, nose and throat clincs are staffed by otolaryngologists, audiologists, and speech pathologists. Cardiac clinics are staffed by cardiologists, pediatric clinical associates, and electrocardiography technicians. Services at clinics include necessary x-ray examinations and laboratory tests, and interview with patient service staff.

Some follow-up services are also offered in locating resources and making appropriate treatment plans. A report of the examinations conducted at the clinic will be mailed to the referring person a few weeks after the clinic.

Eligibility: Persons under 21 years of age

Fees: None. All services at clinics are free and provided on a nondiscriminatory basis.

Official Papers Required: Clinic referral forms. This form must be completed before a clinic appointment is made; you may obtain this form in your local social service office.

Job Service of Iowa

Chamber of Commerce Building
Oelwein, Iowa

911 South Mills Street
Decorah, Iowa

590 Iowa
Dubuque, Iowa

County Courthouse
Manchester, Iowa

For Information Contact: Oelwein - 283-2751 - Helen Bresheers
Decorah - 382-1843 - Mrs. Erickson
Manchester - 927-4447 - Chuck Simmons
Dubuque - 556-5800

Hours: 8:00 A.M. - 4:30 P.M. Monday-Friday

Area Served: Statewide- applicants must register at each office in order to be considered for jobs in that area.

Services:
1. Job placement; available everyday in each of the above offices.
2. Job insurance;
   9:00 A.M. - 12:00 P.M. Wednesday in Oelwein
   Every Thursday in the City Hall in Decorah
   Not available in Manchester; contact Dubuque office
   8:00 A.M. - 4:00 P.M. Everyday in Dubuque

Eligibility: Anyone who is in need of the services. No fee. Show social security card.

Legal Services Corp. of Iowa

Dubuque Regional Office, 677 Fischer Bldg., (W. 9th and Main Sts.), Dubuque, IA 52001, 1-800-942-4619 toll free, 9:00 A.M. - 5:00 P.M.

Area Served: Dubuque area, including: Allamakee, Clayton and Fayette

Services: Provides legal services in the areas of - Housing, Health, Rights, Public Benefits, Employment, Consumer, Education, Institutions. Also provides, community education, browsing and lending library, newsletter and lawyer referral. The staff never accepts a case when:

1. LSCI staff would be in conflict with each other;
2. LSCI had previously served one client and another person wants us to represent them against the client previously served when there would be a conflict of interest including the appearance of impropriety;

3. It involves traffic fines or violations;
4. It involves the probate of an estate; or
5. It involves the defense of a person charged with a crime of any kind.

The staff does not normally represent persons in a particular case when:

1. It involves the defense of a person in a negligence case only;
2. The problem is for a divorce only;
3. It involves the preparation of a Will;
4. It is for an adoption or guardianship only;
5. The problem is for bankruptcy only; or
6. It involves child support only.

Eligibility: Low-income only; income guidelines. No Fees.

Mental Health Institute 319-334-2583
Box 111, Independence, Iowa 50644

Hours: 8:00 A.M. - 4:30 P.M. Monday - Friday. Patients are received on a 24 hour basis, 7 days a week, including holidays.

Counties Served AEA #1: Allamakee, Chickasaw, Clayton, Delaware, Dubuque, Fayette, Howard, and Winneshiek Counties.

Services: Diagnosis, treatment, and aftercare planning services for emotionally disturbed children, adolescents, and adults. These services include provision of medical and dental services which are considered to have an influence on a patient's overall emotional status. The hospital is operated by the unit system utilizing the team approach.

Eligibility: All residents of the counties listed above. They may be admitted voluntarily or involuntarily by a Court Order.

Fee: Fee for services, though no one is refused treatment because of inability to pay. Patients may pay for care from private funds, insurance coverage or both. Counties may use institutional funds to pay costs of residents who are unable to pay.

Mental Health Centers N.E. Iowa
319-382-3649
305 Montgomery St., Decorah, IA 52101
Additional office: 319-283-5774
5 1/2 Charles, Oelwein, IA 50662
(Covers Howard, Winneshiek, Allamakee, Fayette and Clayton Counties)

Cedar Valley Mental Health Center (satellite clinic)
308 N. Maple Ave.
New Hampton, IA 50639
(Covers Chickasaw County)

General Hospital Psychiatric Services and Outpatient
Mercy Medical Center, Mercy Drive
Dubuque, IA 52001

Federally Funded Comprehensive Community Mental Health Center
James and Peabody Streets
Dubuque, IA 52001
319-588-8400
(two previous addresses serve Dubuque County)

Services: To help adults and children with emotional and mental disorders through psychiatric care and consultation; to provide mental health education; to provide follow-up care to persons that have been discharged from psychiatric hospitals.

Eligibility: Referrals can be made by individuals, organizations, etc. Anyone is eligible for service.

Fees: Charged on ability to pay - sliding fees. No person is refused service because of inability to pay.

Muscular Dystrophy Associations of America, Inc.
319-393-8905
4403 First Avenue S.E. 305
Cedar Rapids, IA 52402
9:00 A.M. - 5:00 P.M. (M-F)

Area: Eastern Iowa

Services: The Muscular Dystrophy Association has a broad base on which to help victims of Muscular Dystrophy, and other related diseases. The patient service program provides authorized payment for: orthopedic appliances, physical therapy, education, flu shots, sponsored recreational activities, transportation for clinic appointments and dental appointments. The community services program provides complete examination for the differential diagnosis, including pertinent laboratory tests and if necessary, hospitalization for up to three days. This is conducted in the Muscular Dystrophy Association clinics at the Iowa City University Hospitals or the Younker Memorial Rehabilitation Center in Des Moines. The patient service coordinator helps determine and coordinate all services needed by an applicant.

Eligibility: Person must be diagnosed as having muscular dystrophy or one of 37 other muscular related diseases which the association works with in research, education, and treatment. No Fees. Physician's diagnosis required.

National Foundation March of Dimes
319-583-3755
Northeast Iowa Chapter
P.O. Box 471
Dubuque, IA 52001
Open during weekdays

Area Served: Dubuque, Clayton, Delaware and Allamakee Counties

Services: A. Provides financial assistance based upon need to Northeast Iowa birth defect cases. Sponsors research.

B. Provides information, speakers, film on request from other organizations on the topic of birth defects.
C. Offers opportunities to participate in volunteer functions.

Eligibility: Area residents with birth defects recommended by local physician. No Fees.

Northeast Iowa Community Action Corp., Box 30, Third Floor, Court House,
Decorah, IA 52101 319-382-2918

AEA #1 Counties Served: Allamakee, Chicakasaw, Clayton, Howard, Fayette

Services: Outreach program - assess needs of low-income people, make referrals to appropriate agencies; also emergency services.

Head Start - an early childhood development program for preschoolers from disadvantaged backgrounds. Application is made through the outreach workers.

Community Food and Nutrition - It provides garden seeds, canning jars and equipment and training classes to eligible families.

WIC - The Women's, Infant's and Children's Program is set up to help meet the nutritional requirements of pregnant or nursing mothers and children under the age of five. To qualify a person must meet the income guidelines and show a nutritional risk. Once qualified, the person would receive food vouchers, redeemable for specific food items. Application can be made through outreach staff.

Emergency Energy Conservation Program - provides materials and labor to winterize (insulate, caulk, weather-stripping, etc.) the homes (owned or rented) of eligible families. Funds are also administered for state and federal fuel assistance programs when available. EEC crews will also make minor home repairs to homes of those over sixty.

Youth Employment Programs - creates job opportunities for low-income young people ages 14-21, in the summer and during the school year. Application can be made with outreach workers.

Transportation Programs - provide rides on vans following scheduled routes. Local volunteers in each town make reservations. Those names and routes maybe gotten through the outreach offices. The Handicapped Van, with wheelchair lift, is available to ambulatory and non-ambulatory residents on Tuesdays.

Eligibility: Low-income persons who qualify according to particular program guidelines.

Fees: none

Many of these same services are offered by: Operation New View,
319-556-5130, P.O. Box 152, Peosta, IA 52068

AEA #1 Counties Served: Dubuque and Delaware

Public Health Nursing Services

For Information Contact:
Public Health Nurse Services
County Locations:

Allamakee: Court House
Waukon, Iowa 52172
Ph. 319-568-2451

Clayton: County Office Building
Box 522
Elkader, IA 52043
Ph. 319-245-1145

Chickasaw: Box 355
122 N. Chestnut St.
New Hampton, IA 50659
Ph. 515-394-4053

Delaware: Civil Defense Bldg.
Manchester, IA 52057
Ph. 319-927-2589

Dubuque: 412 Loras Blvd.
Dubuque, IA 52001
Ph. 319-582-5435

Howard: 204 2nd Ave E.
Cresco, IA 52136
Ph. 319-547-2989

Fayette: Box 206
Court House
Fayette, IA 52175
Ph. 319-422-5577

Winneshiek: Court House
Decorah, IA 52101
Ph. 319-382-4662

Services: 1. Skilled Nursing Care - Home visits which includes nursing assessment, monitoring vital signs, health teaching (diet instruction, R.O.M. exercises, etc.) monitoring medications, etc.

2. Health Supervision - which includes infant care, child growth and development, ante and post-partal care, help with immunizations if needed, etc.

3. Resource center for referrals to other agencies, such as obtaining equipment, counselling, financial aid, etc.

4. Monthly W.I.C. (Women, Infant and Children) clinics at Elkader, Guttenberg, and McGregor.

Eligibility: County residents who require skilled nursing care or health supervision.

Fees: Fees for nursing care can be paid by Medicare, Medicaid, private insurance, or private pay. Care not denied if unable to pay.

Regional Genetic Counseling Service, Elizabeth Thomson, R.N., St. Luke's Hospital, 1026 "A" Ave., N.W., Cedar Rapids, IA 52402

Area: Northeast Iowa

Services: Offer clinics throughout the year. Will do laboratory workups, physical examinations, consultation, and counseling for families. Agencies may refer or families may refer themselves, for the private appointments.

Cost: Free

R/R

Shriner's Hospitals for Crippled Children 319-364-5129 (Cedar Rapids)

El-Kahir Shrine (local shrine)	Twin Cities Unit (nearest hospital)
125 5th St. S.E.	2025 E. River Rd.
Cedar Rapids, IA 52401	Minneapolis, MN 55414

Area Served: No geographic limitations

Services: Any crippled or burned child 0-18 years old, whose parents can't pay for type of medical care rendered by Shriner's Hospitals. Will be provided treatment with no cost of family. Application forms are available at Cedar Rapids address.

Social Security Administration

For Information Contact:

Social Security Administration
332 Post Office Bldg.
Dubuque, IA 52001
Ph. 319-583-3626
Serves Dubuque, Delaware, Clayton Counties

904 W. 4th
Waterloo, IA 50702
Ph. 319-234-1554
Serves Fayette County

Box 410 Decorah Bank Building
120 W. Water St.
Decorah, IA 52101
Ph. 319-382-2924
Serves Allamakee, Howard, Winneshiek, and Chickasaw County

Services: Social Security benefits are for retired, disabled, survivors and are administered by Social Security as is Medicare. The Supplemental Security Income is available for people who are 65 or older and for people in need at any age who are blind or disabled. There are, in addition, funds available for State Supplemental Assistance which is a money grant for blind, family life homes, and custodial care.

Eligibility: Must qualify under Social Security Act for Social Security benefits, and guidelines for S.S.I. and S.S.A. assistance. No Fees. Need Social Security Number, Birth Certificate and Income Statement.

State Psychiatric Hospital
500 Newton Road, Iowa City, IA 52242

For Information Contact: (319) 353-4645

Hours: 8:00 A.M. - 5:00 P.M. Monday - Friday

Service: The Hospital offers help to anyone in Iowa with mental and emotional problems. Both in-patient and out-patient care are available. Preference is given to legal residents of Iowa.

Eligibility: All persons are eligible, but residents of the State of Iowa are given priority.

Fees: By arrangement. Funds available through the Department of Social Services in the patient's county of residence.

State Services for Crippled Children
The University of Iowa, Iowa City, IA 52242 319-353-5428

Services: Mobile field clinics offer five kinds of community-based regional clinics. They are: 1) multi-specialty clinics, 2) ear-nose-throat (ENT) clinics, 3) cardiac clinics, 4) muscle disorder clinics, and 5) cystic fibrosis clinics. Testing and examinations are conducted on the children. Some examples are: x-rays, hematology, electrocardiograms, blood chemistry, urinanalysis, hearing tests, etc.

Elibigility: Children under 21 who are in need of special evaluations. No income level requirement. No cost to families.

Referral: Fill out SSCC referral form. Can call to find out clinics closest to your area. Referrals accepted up to 10 days prior to a given clinic.

University Hospital School (For Disability)
University of Iowa, Iowa City, IA 52242 319-353-4131 8:00 A.M. - 4:30 P.M. (M-F)

Services: The University Hospital School offers services to meet the various needs of developmentally disabled in Iowa. The Outpatient Clinic, staffed by professionals from a variety of disciplines, offers a team evaluation that encompasses all facets of a client's needs, which includes guidance for parents. The Residential Program provides therapeutic and educational services for disabled children who are unable to attend local schools. The goal of the University Hospital School is the return of the individual to his local community as soon as feasible. How soon this is accomplished depends on the individual's needs and progress. The interdisciplinary program of support services at University Hospital School includes medical and nursing care, nutrition, Medical-Social Work, speech and hearing, psychology, occupational and physical therapy, positioning therapy, pedodontics, special education, physical education, music therapy, etc. A Myleodysplastics Clinic is held each week for children who have spina bifida.

Women, Infants, and Children Program (WIC Program)

Service: Nutrition program for pregnant, postpartum or breast feeding women, infants and children up to age five, who are determined to be in nutrition need. Program components may include special supplemental foods, nutrition education, and an opportunity to obtain comprehensive health care.

Eligibility: Persons with inadequate income and nutritional risk such as anemia, high risk pregnancy, abnormal growth or inadequate diet.

Locations: Chickasaw County-Operation Threshhold
120 Independence Ave.
Waterloo, IA 50703

Dubuque & Delaware Counties-Iowa East Central T.R.A.I.N.
2604 N. 4th St.
P.O. Box 3021
Clinton, IA 52732

Winneshiek, Howard, Fayette & Clayton Counties-North East Iowa Community Action
305 Montgomery
Decorah, IA 52732

Woodward State Hospital-School
Woodward, Iowa 50276 515-438-2600 8:00 A.M. - 4:30 P.M. (M-F) Emergencies anytime

Area Served: Northern half of the State of Iowa.

Services: Woodward State Hospital-School provides many services for the mentally retarded persons. The services available are:
1. nursing and developmental ward services, 2. nursing education,
3. educational services, 4. vocational habilitation services, 5. recreation services, 6. social services, 7. psychological services, 8. chaplaincy services, 9. medical and clinical services, 10. diagnostic-evaluative services, 11. developmental center services, 12. short term treatment and respite care services, 13. behavior adjustment unit services, 14. special services, and 15. administrative and supporting services.

Eligibility: Need for services and residence within area are served. No fee.

Official Papers Required: Referring agency should send social history and results of any prior educational or psychological testing.

References for Selected Organizations Section:

Clayton County Interagency. The Clayton County Source Book. (Available from Department of Social Services, Clayton County Donation = $1.00).

Thank you is extended to Mr. Bob Rowe for granting permission to use ideas from the Source Book.

Heinrich, John. Paper on Services in Keystone Area Education Agency.

Thank you is extended to John for all his assistance and efforts, in helping to compile the list of organizations.

Personal Phone Calls and Letters by Bill Landers. (to obtain information).

Selected Telephone Services

Child Abuse Hotline Ph. 800-362-2178

Food Stamps Hotline Ph. 800-532-1215

Phone A Friend Crisis Line Ph. 319-352-4016 Service: 24 Hour information, listening, and referrals.

Poison Control Center Ph. 800-272-6477
Service: General information and emergency advice.

National Hotline for Parents of the Deaf Ph. 202-544-2388

First Call for Help (1-800-356-9588) P.O. Box 2373, LaCrosse, WI 54601
24 Hours a day, 7 Days a week

Area Served: Iowa Counties: Howard, Winneshiek, Allamakee, Fayette, Clayton (some counties in Minnesota and Wisconsin).

Services: Information and referral service. Will provide information about local, state and regional services and programs and can refer to agencies or provide emergency counseling. Anyone can call them. No Fees.

Helping Services for Northeast Iowa, Inc.
Box 372, Decorah, IA 52101
Help Line, 382-2989 (collect calls are accepted)
Hours: 24 hours/day phone service
For other services, hours vary.

Area Served: Allamakee, Chickasaw, Clayton, Fayette, Howard and Winneshiek Counties.

Services: Help Line: A free, confidential telephone counseling, information and referral service available 24 hours a day, every day.

Educational Services: Staff members will make presentations to schools and other interested groups in the areas of substance abuse prevention education, human relations training, and public relations programs about the agency's work.

Local Programs: Two other programs are offered that are applicable primarily to Decorah-area residents only: 1) Telecheck (daily telephone contact to homebound individuals) and 2) Drop-In Center for young people to spend leisure time in and with face-to-face counseling available to anyone who requests it.

Eligibility: Any resident of the six counties served. No Fees.

Preschool Handicapped Camping Opportunities

Camp Courageous of Iowa (319-465-5684) P.O. Box 514, Monticello, Iowa 52310
Hours = 8:00 a.m. - 4:00 p.m. (M-F)

1. Area Served: No geographic limitations

2. Services: Non-Profit, non-sectarian corporation that provides camping and recreational services for mentally retarded and physically handicapped of all ages. Recreation programs (February - November) and extensive camping program during summer.

3. Fee: $80.00 per week

4. Papers Required: One page application filled out. Deadline May 1st for summer program. Respite care individual programs are arranged as needed/requested.

Wisconsin Badger Camp for Developmentally Disabled, P.O. Box 240, Platteville, WI 53818 608-348-9689 or 608-988-4558 (after June 1) Hours = 8:00 a.m. - 4:30 p.m.

1. Area Served: No geographic limitations

2. Services: Non-profit corporation. Provides positive camping experiences. Programs available all year round. Nine week summer camping program. Staff 1: 1 1/2. Persons 4-94 are eligible; day camp for 2-12 year olds.

3. Fees: Vary. No one ever turned away because of financial inability.

4. Papers Required: Application. Deadline May 1st.

SELECTED PROFESSIONAL ORGANIZATIONS

Below are some selected professional organizations that preschool handicapped teachers might be interested in joining:

American Association On Mental Deficiency
5201 Connecticut Ave. N.W.
Washington, D.C. 20015

American Association for the Education of the Severely/Profoundly Handicapped
Garden View Suite
1600 W. Armory Way
Seattle, Washington 98119

Council For Exceptional Children
1920 Association Drive
Reston, Virginia 22091
(Has a Division of Early Childhood [DEC])
(local chapter in Dubuque Chapter No. 910
contact: Louise Wade
Conlin Bldg.
1473 Central Ave.
Dubuque, IA 52001
Ph. 588-0538

National Association for the Education of Young Children
Editorial and Publications Dept.
1834 Conneticutt, Ave. N.W.
Washington, D.C. 20009
Ph. 202-202-8777

(Write addresses to request information on dues, subscriptions and publication lists).

DENTAL HELP FOR HANDICAPPED CHILDREN

If you need assistance in locating a dentist who works with handicapped individuals, several groups may be helpful:

The University of Iowa
Regional Dental Center
University Hospital School
Iowa City, Iowa 52242

District Office of Social Services in Your Area

Academy of Dentistry for the Handicapped
1240 E. Main St.
Springfield, Ohio 45503

Iowa State Services for Crippled Children

American Dental Association for Cerebral Palsy
122 E. 23rd St.
New York, NY 10010

Patient Management Services Consultant
Iowa City, Iowa 52242
Call: (319) 353-5428

National Foundation of Dentistry for the Handicapped
1121 Broadway Suite 5
Boulder, CO 80302

Your local dental society
(check your phone book or write to the American Dental Association for addresses of the dental society near you)

References: Caring For Your Handicapped Child's Dental Health. American Dental Association, 211 E. Chicago Avenue, Chicago, Illinois, 1977.

Lancial, Lynette. A Guide to Oral Care for the Disabled. University Hospital School, Division of Developmental Disabilities, The University of Iowa, Iowa City, Iowa. (Write for this Free Brochure)

Helping Children to Understand Handicapping Conditions

Books for children designed to help them become more aware of individual differences, and feelings.

Fassler, Joan. Howie Helps Himself. Albert Whitman and Co., Chicago, IL, 1975. (Physically handicapped.)

Gregory's Stitches. Albert Whitman and Co., Chicago, IL. (Stitches.)

Klein, Gerda. The Blue Rose. Lawrence Hill and Co., New York, 1974. (Mental retardation.)

Lasker, Joe. He's My Brother. Albert Whitman and Co., Chicago, IL. (Mental retardation.)

Litchfield, Acke B. A Button in her Ear. Albert Whitman Co., Chicago, IL, 1976. (Hard of hearing.)

Rey, M. Curious George Goes to the Hospital. Houghton Mifflin Co., Boston, 1966. (Hospital.)

Simon. I Know What I Like. Albert Whitman and Co., Chicago, IL. (Feelings.)

Stein, Sara Bonnet. About Handicaps. Walker and Co., New York, NY. (Physical handicap.)

ADDITIONAL SOURCES OF YOUR CHOICE:

Information for Parents

Why not encourage parents to write for some of the following materials?

1). Children Newsletter.
Contains current information dealing with children, families, day care, legislation, books, etc. (Free)

Address: Iowa Council for Children
Office of Planning and Programming
523 E. 12th Street
Des Moines, IA 50319

(ask to be put on their mailing list, also ask for publication list).

2). A Parent's Guide to Special Education

Summarizes rights of parents, laws, area education agencies, etc. (Free)

Address: Iowa Association for Retarded Citizens
1707 High Street
Des Moines, IA 50319

(Request a copy of the book and ask to be put on their mailing and publications list.) (Ask about the local affiliate group in your area and who to contact.)

3). Practical Advice to Parents - a guide to finding services.

Know Your Rights - answers questions about rights of all children to an appropiate education.

Report from Closer Look - a periodic review of issues, resources and events.

All Closer Look materials are free. Closer Look dispenses information on services to handicapped and will answer specific questions.

Address: Closer Look
Box 1492
Washington, D.C. 20013

4). Publication List - extensive listing of pamphlets and leaflets on handicapping conditions. (inexpensive)

Address: National Association for Retarded Citizens
2709 Ave. E. East
Arlington, Texas 76011

(ask for publication list)

5). Publications on child development, infant care, families, etc.

Address: Ross Laboratories
Columbus, Ohio 43216

(ask for publication list and request leaflets on above subjects)

6). Publication list - Free or inexpensive brochures on a variety of subjects related to families.

Address: Consumer Information Center
Pueblo, CO 81009

(request to be put on their mailing list. They will send you a list of available pamphlets).

7). Let's Enjoy Parenting (booklet - Free)
Ideas on parenting, dealing with a child's behavior, etc.

Address: School Social Work Services
Keystone Area Education Agency
Elkader, IA 52043

8). Parents As Image-Makers (50¢) (Booklet)
Helping a young child develop a positive self-image.

Games to Grow On ($7.00) for all three idea packets listed below
Contains more than 150 game-like learning activities, using 'round the house materials.

$2.50 ea.	Games to Grow On For The 1st Year (0-1 year old)
$2.50 ea.	Games to Grow On for Ones (1-2 years old)
$2.50 ea.	Games to Grow On for Twos (2-3 years old)

Address: Parent - Child Early Education
Fergusson - Florissant School District
655 January Avenue
Fergusson, MO 63135

9). Books and Magazines on exceptional children and their families.

Address: Exceptional Parent Magazine
P.O. Box 964
Manchester, NH 03105

(ask for subscription information and information on available books)

10). Growing Child (Newsletter) - This comes each month with activities and ideas for working with the child at each month of development.

Growing Parent (Newsletter) - This newsletter deals with items of special interest to the family. Books and toys may also be ordered.

10). Address: Growing Child and Growing Parent
22 N. 2nd St.
Lafayette, Indiana 47902

(write for in-depth information on the two newsletters and cost for subscription. An excellent resource for ideas for young infants.)

11). Caring Magazine - Magazine coming out every other month except July and August. Questions and answers from parents. Some articles by professionals.

Address: Caring
P.O. Box 400
Milton, Washington 98354

(write for information and subscription details)

R/R

COOPERATIVE NETWORK OF IN-SERVICE RESOURCES

Bibliography of Materials
PRESCHOOL HANDICAPPED CHILDREN
Available from CNIR
February, 1979

2995 **A CHILD IS A CHILD**
AIMS 1973 7min Sd Color 16mm Prof
This film shows children with handicaps integrated with non-handicapped children in the preschool laboratory at California State University. This film emphasizes that the handicapped child has more in common with other children than he has differences.

3161 **THE PREVENTION OF STUTTERING, PART 1: IDENTIFYING THE DANGER SIGNS**
Seven Oaks 1974 33min Sd Color 16mm Prof
This film introduces and distinguishes normal from abnormal disfluencies in the speech of children from two to six years old. Fifteen different children exhibiting different patterns of developing stuttering behavior are shown. Eight danger signs of developing stuttering behaviors are dealt with: multiple perpetitions, the schwar vowel, prolongations, the stuttering tremor, pitch rise, struggle and tension, the moment of fear and avoidances. See also film #3162.

3162 **THE PREVENTION OF STUTTERING, PART 2: PARENT COUNSELING AND ELIMINATION OF THE PROBLEM**
Seven Oaks 1974 44min Sd Color 16mm Prof
This film focuses on the role of the parent regarding the stuttering child. It contains stutterers age 2-6 interacting in typical stressful scenes with parents and counseling sessions with parents which emphasize the parents' role in helping to eliminate the problem. Closeups of non-verbal cues like facial reaction and body posturing are shown, revealing the penalizing or negative factors affecting the child's speech. See also film #3161.

3396 **INCLUDING ME**
Capital Cities TV 1976 58min Sd Color 16mm Prof
In six sensitive portraits, Patricia Neal guides us to heightened understanding of the handicapped child and appreciation of just how much an appropriate education can mean to him. The portraits include: Danny, two and blind; Suzanne, 16 and deaf; Jed, 18 and retarded; Lisa, 8 and multiply handicapped; Gary, 13 and emotionally disturbed; and Dennis, 20 a paraplegic. The film theme is that with an appropriate education, handicapped children have every chance to be as self-fulfilling as anyone else.

3408 **IT'S OKAY TO BE DEAF, DENISE**
Viewfinders 1976 28min Sd Color 16mm Prof
Follows the first six years in the life of a deaf girl, showing her adjustment and the adjustments of her parents and older sister to the problem. Features the "Total Communication" approach (sign language and finger-spelling, with speech, lip reading and body language).

3409 LOVE IS TO GROW ON
Multi Video Int. 1977 24min Sd Color 16mm Prof
A sensitive treatment of the real potential of children with Downs Syndrome (Mongolism). Beginning with the birth of a baby, the film takes the viewer through the total development of individuals with this handicap. Emphasizes the advantages of raising such children in a home and community atmosphere and demonstrates how they do have the capabilities of becoming an integral part of home, school and community environment. An adaptation of a multimedia program by Dr. Joseph L. Morquist of St. Paul, Minnesota.

6445 INITIAL PERCEPTUAL TRAINING
Thorne 1964 8min Sd Color 16mm Prof
Part of a series showing a comprehensive teaching program for trainable mentally retarded. The techniques used, based on a knowledge of human development, are relevant to many teaching-learning situations, especially at the pre-school level. Shows exercises involving various sensory areas to help improve perceptual skills, including sense discrimination and eye-hand coordination. Aids for Teaching the Mentally Retarded (Part B).

7255 THE END OF A MORNING
Educ.Dev.Ctr. 1969 16min Sd BW 16mm Prof
After watching students and teachers at work in an individualized headstart program, viewers observe the teachers discussing their class at the end of the morning.

7389 LOOKING FOR ME
Univ. of California 1970 29min Sd BW 16mm Prof
Explains how in working with both normal and emotionally disturbed children, body awareness and body language are used to produce new experiences and emotions which eventually lead to a basis for verbal communication. Shows therapist Jane Adler establishing a relationship with two autistically isolated girls, ages 2 and 5, through movement awareness.

7429 CYNTHIA DRESSES HERSELF
Teaching Research ND 10min Sd Color 16mm Prof
Provides helpful suggestions for teaching a retarded child how to dress himself. Ideas are given on when to start, types of clothing to use, steps in the teaching process, and rewards that may be used.

7430 KRISTEN LEARNS TO EAT
Teaching Research ND 11min Sd Color 16mm Prof
Gives guidelines and helpful recommendations for teaching a retarded child how to feed himself. Easily made or purchased special utensils are shown for children with physical disabilities. Ideas are illustrated as they are discussed.

7462 WE TIPTOED AROUND WHISPERING
Maryland College 1970 30min Sd Color 16mm Prof
A documentary on what parents of deaf children experience from the birth of their child until the deafness is diagnosed. For use with families of deaf children and with professionals who desire more understanding of the psychodynamics parents experience in the discovery of their child's deafness.

7527 TOTAL COMMUNICATION
Maryland College 1972 15min Sd Color 16mm Prof
Explains and demonstrates total communication. Shows a preschool class of deaf children. Also shows interviews with parents of young deaf children. Aimed at parents and professionals.

7561 GENESIS
Hallmark 1971 25min Sd Color 16mm Prof
For anyone-layman or professional--involved in the lives of the mentally retarded. Genesis teaches how to train basic self-help skills--dressing, eating, toileting. Step-by-step procedures for using behavior modification techniques successfully for teaching self-help skills are demonstrated. See also films #7562 and #7563.

7562 ASK JUST FOR LITTLE THINGS
Hallmark 1971 20min Sd Color 16mm Prof
Provides anyone working with the mentally retarded with successful methods for training the child in life skills--ambulation, personal hygiene, and attending. Actual training sessions using behavior modification are shown. See also films #7561 and #7563.

7563 I'LL PROMISE YOU A TOMORROW
Hallmark 1971 20min Sd Color 16mm Prof
Designed to teach the basic concepts of preparing the mentally retarded child for a special education setting in the community. Shows the viewer how to teach the life skills of communication--the basic use of words and simple sentences; direction following--easy commands which lead to obeying rules and becoming manageable in the home or classroom; group participation--teaches how to handle a group of children and how to orient a child to a group situation. Film number three in "The Step Behind" series.

7680 A TIME FOR GEORGIA
New York Univ. 1970 15min Sd BW 16mm Prof
A sympathetic view of Georgia, an autistic four-year-old. Characteristic behaviors and ways of inducing Georgia to feed herself and to participate in play are viewed.

FSC-861 LEARNING IN THE HOME:
FAMILY ACTIVITIES THAT TEACH
New York SEIMC 1973 Filmstrips/Cassettes Prof
Particularly useful for training parents of young, physically handicapped children, but may be valuable to parents of children with other kinds of handicaps, as well as to teachers. Reflects a Montessori inspired early childhood approach.

FSC-1133 ALL DAY KINDERGARTEN
National AV Center 1975 Filmstrips/Cassettes Prof
The students in this program are disadvantaged, inner-city preschool children who score at or below the 25th percentile on a preschool inventory. Children attend kindergarten for full-day sessions, performing a variety of activities designed to increase their motor, perceptual, and auditory skills and their

language and concept development. Weekly field trips provide them with new experiences, and medical and dental services are made available to them. To motivate families to help their children develop, parent participation in the program is encouraged. Right to Read series.

FSC-1136 CHILD-PARENT CENTERS
National AV Center 1975 Filmstrips/Cassettes Prof
The goal of the program is to reach disadvantaged children when they are three years old and to provide them with consistent, unbroken instruction through third grade. Eleven centers serve a total of over 2,000 inner-city children, each center offering a unique instructional program tailored to its own community. All centers have a basic skills orientation and aim at developing pupils' use of language; but, while some use tightly structured linguistic programs, others have chosen approaches which allow more pupil independence. Parents have an integral role in the program, spending two days a month at their centers in meetings, in home economics classes, or as staff volunteers. Right to Read series.

To borrow these items, or for further information about CNIR, call 1-800-542-7821 (toll free).

Available to K-12, AEA, and DPI educators in Iowa. The only charge to the borrower is return postage.

NOTE: Your principal and/or superintendent should have a copy of the basic CNIR catalog of materials for 1978-79.

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RESEARCH

OVERVIEW OF HISTORY AND RESEARCH IN EARLY CHILDHOOD-SPECIAL EDUCATION

Educational Pioneers

An interest in the education of young children is not a recent development. Plato (427-347 B.C.), a philosopher and educator in ancient Greece, expounded upon the importance of home instruction to prepare young children for adulthood. Caldwell (1970), suggests that the educational pioneers Comenius (1592-1670), Rousseau (1712-1778), Pestalozzi (1746-1827, Froebel (1782-1852), Margaret McMillan (1860-1931) believed in the importance of early education. Jean Itard (1774-1838) was one of the first people to attempt educating a mentally retarded boy. In his book The Wild Boy of Aveyron he describes his work with Victor, an eleven year old, who was found in the woods in Southern France. Itard's work facilitated an interest in the field of mental retardation. Edward Seguin (1812-1880), a student of Itard, published the book The Moral Treatment, Hygiene, and Education of Idiots and Other Backward Children. In 1848 he immigrated from France to the United States and established the first residential facility for the retarded, and devoted his life to the training and treatment of mentally deficient children.

In 1896 John Dewey established a laboratory school for 4-5 year olds. This was the beginning of child study and education centers for young children in this country. At almost the same time, Patty Smith Hill, renown pioneer in early education, became the director of the Model Kindergarten in Louisville, Kentucky, a forerunner to our present-day kindergarten programs.
Maria Montessori (1870-1952) was an assistant at a psychiatric clinic in Rome. In 1907 Maria organized the Orthophrenic School for the Cure of the Feeble-minded, where she practiced a self teaching method of instruction. Many of her students passed the public examinations for primary certificates, after participating in her program.

Jean Piaget (1896 --) has spent a lifetime researching and studying children and their learning processes. Many of his ideas and theories are either directly or indirectly a part of all early intervention programs. His studies have been utilized by Uzgiris and Hunt in the Ordinal Scales of Psychological Development, the Perry Preschool Project (Weikart), and by many other preschool educators.

Arnold Gesell founded the Clinic of Child Development at Yale in 1911. Several of the studies which resulted from the clinic's research are classics in the early education of young children. A few years later the Iowa Child Welfare Station was created, and the first laboratory preschool came into being there in 1921. Other child study departments were started at Columbia, Minnesota, Berkeley, etc.

Two Landmark Studies on Early Education

Skeels and Associates (1939) did an experimental study with young infants by placing thirteen babies in an institution under the care of retarded adolescent girls. Twelve other babies in the study were left in the orphanage receiving no extra care and stimulation. The babies that received early enrichment from the mentally retarded girls made significant gains in development. In a follow-up study it was found that this pattern continued into adulthood.

In 1958 Samuel Kirk discovered that preschool mentally retarded children who received early nursery school experience showed the greatest gains in development and that these gains were sustained for several years. This five year longitudinal study clearly demonstrated that early treatment is vital if children are to reach their potentials.

Some Findings of the 1960's

In the early 1960's President Kennedy created a panel on mental retardation to focus attention on the status of mentally retarded in our society. As planned, this panel stimulated a new public awareness of the handicapped.

J. McVicker Hunt (1961) presented evidence that experience has a crucial role in the development of intelligence. He further stated that society should be more aware of what happens in the life of the very young child. Bloom (1964) performed a longitudinal study of a number of the major studies that had been conducted during the first half of the 20th century. He went on to suggest that nearly 50% of the development of a child takes place between conception and four, 30% between ages four and eight, and 20% between ages eight and seventeen. Bruner (1960) contributed to this thinking by stating that education could help improve the environmental experiences needed by a child for sound development.

In the late 1960's there was much research completed to substantiate the importance of early education. Gray (1966), Caldwell and Richmond (1968), Bereiter and Englemann (1966), Nimnicht and Meier (1967), Karnes (1969), Hodges, Spicker and McCandless (1967), and many other professionals conducted studies on early education. There was one main consistent finding by all of the researchers: Early enrichment facilitates positive gains in the intellectual development of children.

Research in the Early 1970's

Thomas Jordan (1971) found in a longitudinal study of 1,000 infants that there may be a critical period in which environmental factors are the most influential. This period seems to be between 24 months and 30 months.

Dalta, Weikart, and McDaniels (1973) indicated from their research that there are three characteristics that facilitate program effectiveness. They are: 1) specific goals, 2) utilization of time (time in which the intervention takes place and amount of time devoted to accomplishing the goals), and 3) specific training.

Bronfenbrenner (1974) suggested that intervention will be less effective unless the home and parents are involved. Parent's should be an integral part of the child's program.

Steward and Reynolds (1974) found that the increase in survival rate of premature and low birth rate infants does not mean an increase in the number of handicapped children. In a five year study, they found that 90.5% of these children had no detectable handicap. Thus, intensive care not only increases the chance of survival for infants of low birth rate, but also reduces the number of serious handicaps in the survivors.

Karnes and Teska (1975) have discovered that children can improve cognitively from 1/2 to 1 standard deviation on measures of cognitive ability if they have participated in a specific instructional program designed for their individual needs. The chances of them maintaining most of this gain increases if the intervention program is structured.

Gordon (1975) has completed several studies on young children. Her findings suggest that the use of a multi-disciplinary team can result in more precise knowledge of a child's abilities and disabilities in all aspects of development. Programs should be implemented to work on multiple areas of development rather than on the acquisition of segregated skills. Skills gained in one area have an effect upon the growth of other areas.

Miller and Dye (1975) investigated the effects of four educational models: 1) Bereiter-Englemann (B-E), a highly didactic, drill-oriented program, 2) DARCEE, a program model structured around lesson plans and study units (i.e. seasons, animals, etc.) 3) Montessori, a self-correcting and self-paced program, and 4) traditional, which places emphasis on social interaction and play. The results indicated that the structured programs produced greater gains. However, they also found that a program which relies totally on a highly structured format may decrease initiative in dealing with academic situations, such as, finding innovative solutions to a problem. The researchers also observed that programs that have a high rate of negative feedback can depress task initiative. The effects of educational programs are probably related more to the quality of the program, rather than the model being employed.

Heber and his Associates (1975) studied culturally disadvantaged families, in the slums of Milwaukee. Their findings indicate that parents can be effective teachers, and do make a positive difference in children's development. Children made positive I.Q. gains which they have continued to maintain several years later. The key point of the study is that parents must participate in order to insure maximum results of the intervention for their children. Also, intervention may prevent handicaps that are largely environmental in origin.

Through early training Down's Syndrome children can progress at a much higher rate than was previously believed was researched by Hayden and Haring (1976), Bricker and Bricker (1973), and Rynders and Horrobin (1975).

Hayden and Associates (1975) found that the family can most effectively and economically foster and sustain a child's development. Parents also tune out to training that is not based on their needs.

Burton White has done research on children for nearly 25 years. He indicates that the first three years of life are crucial to a child's development, and that the early influences of the environment can facilitate or hinder a child's development.

Yarrow and Associates (1975) found that stimulation done simply for the sake of stimulation may not be beneficial. They suggest that adults should be selective in the types of stimulation used, and that it should be geared for each child's needs.

Some Longitudinal Studies

Lazar (1977) coordinator of the Consortium for Longitudinal Research has now confirmed that the gains made by handicapped children in preschool are long lasting. He worked with twelve programs that conducted studies in the 1960's to re-evaluate their data and findings, and to do longitudinal studies on the children. Another finding was that preschool handicapped children who received early intervention were less likely to be enrolled in or to return to special education classes, and that fewer of these children had to repeat grades.

Hayden and Associates (1977) located 116 children who had previously graduated from the Model Preschool Center, University of Washington, Seattle. These children had been diagnosed with a handicapping condition in preschool and received intervention. Hayden found that 34% of these children were in regular education classrooms. Another 22% of the sample still needed support services but were functioning cognitively as well as others in regular class placements. Children who participated in the preschool program had maintained their cognitive gains into the elementary grades.

The studies by Weikart and his Associates originally started in the late 1960's. They kept careful data on their children into the 1970's and published three monographs in 1978. The findings are:

The Ypsilanti Perry Preschool Project: Preschool Years and Longitudinal Results Fourth Grade Monograph No. 3

1. preschool experience made a difference in the development of the children and the gains have held up five years into the elementary grades. Impact on school achievement and grade placement have been sustained.

The Ypsilanti Preschool Curriculum Project: Preschool Years and Longitudinal Results Monograph No. 4

In the late 1960's Weikart and associates studied the three dominant approaches to early childhood education. They were: 1) programmed, which was the Bereiter-Englemann approach. This approach is drill-oriented and highly structured. 2) open framework--This was the Ypsilanti Perry Preschool, which is progressive and cognitive developmental and 3) child-centered--This is the traditional approach, modeled after the typical nursery school, which focuses on social and emotional growth.

The programs were found to be equally effective both during and after preschool, and the cognitive gains were still being maintained five years after they entered elementary school. The children's achievement in elementary school was markedly superior to that of a comparable group of children who did not attend preschool.

An Ecomomic Analysis of the Ypsilanti Perry Preschool Project. Monograph No. 5

The results were that the costs more than compensated by the benefits to society in terms of: 1) less costly education (e.g. less special education or institutionalized care) for the experimental group, 2) higher projected lifetime earnings for this group, and 3) time released from childcare responsibilities for the parents of this group. The authors state, "Without any future research one year of preschool compensatory education has economic justification."

Conclusion, But Only the Beginning . . . .

Many ideas have been accumulated on preschool handicapped children. The importance of the early years has been substantiated, as have the importance of parent participation. Currently, there are many researchers doing new and innovative studies, which will add even more information and impetus to our efforts in serving the young handicapped child and his family. Our knowledge base continues to expand, as does our expertise in serving this population . .

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ADDITIONAL SOURCES OF YOUR CHOICE:

ATTITUDE TUNE-UP

SAYINGS/THOUGHTS TO REFLECT ON. . .

--Children are not things to be folded, but people to be unfolded.

--. . . . . I feel the capacity to care is the thing which gives life its deepest significance.--Casals

--It isn't the mountain that wears you out, but the grain of sand in your shoe.

--Children tend to become the kinds of people their teachers are . . . . Of course, their "teachers" may be their parents, their peers, or their school teachers. We must use ourselves in positive, creative ways to provide the image, the kind of stimulus, the kind of feedback that helps them to develop their potential and a genuine concern for others.

--People never stand so tall as when they stoop to help a child.

--A journey of a thousand miles must begin with a single step.--Lao Tze

--Education is not something that goes on only in the classroom, but occurs throughout the child's day. It is the sum total of all that has happened from the first good morning to the last good night.--Bobath

--In order to fully appreciate the beauty of the butterfly we must first nurture the caterpillar.

--The secret of success is not having more, but wanting less.--Thoreau

--Children are like the colors in a rainbow; each is beautiful, unique, and important.--Bill

--Help me to never judge another until I have walked two weeks in his shoes.

--A teacher affects eternity; she can never tell where her influence stops.

--Education is to develop talents and personalities. The simplest thing we learn to do well--even if it is only to sweep a room in a beautiful spirit of service--makes life infinitely worthwhile and is true education. When we do the best we can, we never know what miracle is wrought in our life, or in the life of another.--Helen Keller

--The teacher gives not of his wisdom, but of his belief and lovingness.--Gibran

--You cannot make a man anything; you can only help him find it within himself.

--The wise man looks into space, and does not regard the small as too little, nor great as too big; for he knows that there is no limit to dimensions.--Lao tze

--To know that one life has breathed easier because you lived, is success.--Emerson

--Every man that I meet is in some way superior; and in that I can learn from him.

--Give me a fish and I'll eat for a day; teach me to fish and I'll eat for a lifetime.

--When love and skill work together expect a masterpiece.--Ruskin

--Do you see difficulties in every opportunity or opportunities in every difficulty?

--One of the most important things a teacher can do is to send a child home in the afternoon liking himself just a bit better then when he came in the morning.

--The hates of the world are defeated by the sound of children's laughter.--Segal

--. . . of great importance to a child's learning is his relationship with a caring adult and the amount of time and interest they share.--Montessori

--. . . perhaps the truest measure of a man lies not in what he achieves for himself . . . but in the nobleness of what he aspires for others.--Tailor

--Children are the world's most valuable resource and its best hope for the future.--John F. Kennedy

--Not he who has much is rich; but he who gives much.--Fromm

--Love, a spirit of adventure and excitement, a sense of mission has to get back into the classroom. Without it our schools - and our country - will die.--Jesse Stuart from To Teach, To Love.

--If a man does not keep pace with his companions, perhaps it is because he hears a different drummer. Let him step to the music he hears, however measured or far away.--Thoreau

--I don't know what your destiny will be, but one thing I do know, the only ones among you who are really happy are those who have sought and found how to serve.--Albert Schweitzer

--Compared to what we ought to be, we are only half-awake. We are making use of only a small part of our physical and mental resources.--William James

--The worst bankrupt in the world is the man who has lost his enthusiasm. Let him lose everything but enthusiasm and he will come through again to success.

WHAT TO DO AFTER A BAD DAY. . . . .

1. Talk things out with someone you can trust.
2. Write out your feelings on paper.
3. Do something for someone else.
4. Go for a walk and get into nature.
5. Slip into a soft, comfortable chair. Think of the most peaceful scene you can think of. Empty your mind of tension and tightness. . .
6. Participate in a recreational activity. Get involved in a hobby. Try a new activity. Dive into a fun project you have wanted to do for awhile.
7. Read poetry, a novel, etc. Listen to soft music. Take a relaxing bath. Massage away your tension. Do whatever makes you feel fresh again.
8. Go to bed early. Start tomorrow renewed and alive. "Each day is an opportunity to start over again. . . to cleanse our minds and hearts anew and to clarify vision. And let us not clutter up today with the leavings of other days."

--I still find each day too short for all the thoughts I want to think, all the walks I want to take, all the books I want to read, and all the friends I want to see. The longer I live the more my mind dwells upon the beauty and the wonder of the world.--Burroughs

*ARE YOU IN A RUT?!!??!!??

"Looking back on this past week, I can-------"

1) name at least 4 children I made feel good and important.

2) list at least 2 completely new and innovative teaching ideas I used with children.

3) name 5 adults or children I complimented.

4) recall one day I went the entire day without complaining.

5) name: 2 people I hugged
1 person I told I loved
2 people I tickled
2 incidents where I laughed at myself
1 song I either sang, hummed or whistled

6) name 1 good deed I did and told no one I did it.

7) recall 10 positive statements I made.

8) name 20 people I smiled at this week.

9) name at least 3 hobbies or leisure time acitvities I involved myself in this week.

10) recall at least one person I did a favor for.

11) recall spending at least one uninterrupted hour by myself.

*Especially good for January, February and March months.

Remember: The only difference between a rut and a grave is the depth.

A

HOW TO SURVIVE TEACHING. . . PARENTING. . . . LIFE. . . .

I. Communication is vitally important
- A. Develop intrapersonal/interpersonal communication skills.
- B. Rationale (Why do you do what you do?)
- C. Radiating belief in self and what doing.
- D. Action over words; avoid verbal pollution.
- E. Think in terms of alternatives and flexibility.
- BE HUMAN! F. Also think in terms of specificity when talking about the child and his program.
- G. Each individual has a right to his opinion.
- H. Listen with interest and concern.
- I. Organization, Timing, and Documentation.
- J. Meet people center to center; human being to human being.
- K. Be able to say "I am sorry" and "I was wrong" when you make a mistake.

II. Avoid criticizing another individual
- A. Suggestions over "telling" a person something.
- B. Use examples and stories to illustrate key points and ideas.
- BE HUMAN! C. Strive to be understanding of others (Be a giver, not a taker or grabber).
- D. Set a good model. Children are in more need of models than critics.--Joubert
- E. Strive to follow the teacher code of ethics (belief in people).

III. Put the child on the top of your priority list
- A. Every person is important and every behavior is significant.
- B. Teach the child about life and himself.
- BE HUMAN! C. Strive to better look and listen to the child. Get into his head and you will find he is an excellent teacher. He will teach you much about life.
- D. Avoid setting double standards--one for you and one for the child.
- E. Accept the child as he is, for what he is, at his own unique level.
- F. Foster appropriate independence and a positive self-image.
- G. Give a child a little, and you get a lot back.

IV. Develop yourself into a positive human being

- A. Avoid ruts (be innovative-changeable-alive). Remember nothing ventured, nothing gained. Make the "tingles" supercede the "downers"!
- B. Develop your own philosophy of life and philosophy of teaching.
- C. Take pride in yourself and your work. Share it with others.

BE HUMAN!

- D. Live a rich, full life. Get into new experiences and new people. Always put people over things. Hummanness over materialism.
- E. Maintain humor. If not able to laugh at yourself, then who can you laugh at?
- F. Strive to be gentle, loving, enthusiastic, understanding. . . . . . You!
- G. Have fun! Carpe Diem! (capture the moment; live for the now).
- H. When you see someone without a smile, give him yours.
- I. Develop your skills and give them away as gifts. It is in the giving that we receive.

I CHALLENGE YOU---------

1. to be a cautious consumer
2. to be an interested listener
3. to use a positive approach
4. to be consistent in your teaching and expectations
5. to develop an instructional program for each child
6. to look for the causes behind behavior
7. to have a rationale for what you do
8. to look at each child in terms of his developmental levels and skills
9. to document in writing your findings on children
10. to use a team approach in teaching (including cooks, janitors, bus drivers, etc.)
11. to use trial and error methods in teaching
12. to communicate with children and adults to the best of your ability
13. to believe in yourself, to nourish yourself
14. to do an "attitude tune-up" whenever you feel a need to be more positive
15. to find workable compromises whenever you disagree with people
16. to make a commitment to a cause. . . for disabled children
17. to be honest and sensitive when dealing with big and little people
18. to be a doer rather than a talker (action over words)
19. to have fun and keep your sense of humor
20. to help each person feel important
21. to "make today count" (saying by Orville Kelly)

BEST WISHES FOR A HAPPY LIFE!!!!!!!!!!!!!!!!!!!!!

Please Forgive Me When I Whine

-Author Unknown

"Today upon a bus I saw a lovely maiden
I envied her . . . She seemed so nice . . .
with golden hair;
And oh, I wished, I were so fair.
When suddenly she rose to leave
I saw her hobble down the aisle,
She had one foot and wore a crutch,
But as she passed, a smile . . .
Oh, please, forgive me when I whine . . .
I have two feet . . . the world is mine.

And when I stopped to buy some sweets,
The lad who served me had such charm;
He seemed to radiate good cheer,
His manner was so kind and warm.
I said, "Its nice to deal with you,
Such courtesy I seldom find."
He turned and said, "Oh, thank you, sir!"
And then I saw he was blind . . .
Oh, please forgive me when I whine . . .
I have two eyes . . . the world is mine.

Then, walking down the street
I saw a child with eyes of blue.
He stood and watched the others play;
It seemed he knew not what to do.
I stopped a moment, then I said,
"Why don't you join the others dear?"
He looked ahead without a word
And then I knew he could not hear . . .
Oh please, forgive me when I whine . . .
I have two ears . . . the world is mine.

With feet to take me where I'd go,
With eyes to see the sunset glow,
With ears to hear what I should know,
I'm blessed indeed . . .
The world is mine, Oh, please
Forgive me when I whine."

A

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ADDITIONAL SOURCES OF YOUR CHOICE:

MISCELLANEOUS

TEACHERS OF PRESCHOOL HANDICAPPED

Description: Authorized to provide specialized instruction for children less than seven years of age who require special education programs and services. When a teacher is serving a class of children where the primary handicapping disability of each is the same, as for example in a preschool class for the hearing impaired, the teacher must have full approval in the disability area (approval 82 for the hearing impaired example.) Preschool handicapped authorization alone will not suffice in these cases.

APPROVAL REQUIREMENTS:

Option 1: Completion of requirements (available upon request) for endorsement 53 (prekindergarten-kindergarten) and an approved program (criteria available upon request) designed specifically for the training of teachers of the handicapped preschool child (including supervised practicum experience with preschool handicapped children) of at least 20 semester hours beyond the requirements for the 53 endorsement program.*

Option 2: Completion of the requirements (available upon request) for endorsement 53 (prekindergarten-kindergarten) and 20 semester hours in special education distributed among disability areas, including a supervised practicum experience with preschool handicapped children.*

NOTE: *It is anticipated that sometime during the Fall term of 1979-80 school year a new endorsement for preschool handicapped authorization will be available which will allow completion of a specialized sequence in preschool handicapped instruction, thereby waiving the need for individual serving this population to actually hold endorsement 53.

TEMPORARY APPROVAL:

Option 1:
1. Endorsement 53.
2. Completion of 8 semester hours in special education.
3. Agreement to pursue full approval at the rate of at least two courses a year (must complete full approval requirements in 3 years.)

Option 2:
1. Endorsement 10.
2. Completion of 8 semester hours in special education and 8 semester hours in early childhood education.
3. Agreement to pursue full approval at the rate of at least two courses a year (must complete full approval requirements in 3 years.)

Option 3:
1. Endorsement 35.
2. Completion of 8 semester hours in early childhood education.
3. Agreement to pursue full approval at the rate of at least two courses a year (must complete full approval requirements in 3 years.)

From: Department of Public Instruction, Division of Special Education, Grimes State Office Building Des Moines, Iowa 50319 7/79.

GUIDELINES TO PREKINDERGARTEN -KINDERGARTEN TEACHER PREPARATION

A program of professional preparation should include knowledge and competencies in the following areas:

1. A broad educational background including study in humanities, liberal arts and sciences, as required in a four year curriculum in accredited colleges.

2. Knowledge of human growth and development from birth to maturity, including especially the period of birth to twelve years, and with emphasis on the period of birth to six years, including growth characteristics, factors influencing personality development, the meaning of behavior, and how children learn during this period of life.

3. Knowledge of philosophy, curriculum and methodology of education for young children including:
    A) Curriculum content, materials, equipment and space needed for prekindergarten and kindergarten programs which are planned to promote the intellectual, physical, emotional and social growth of children three to six years of age.
    B) Guidance of young children three to six years of age.
    C) History, philosophy of education, including prekindergarten-kindergarten, and contemporary problems in education.
    D) Organization and administration of prekindergarten-kindergarten programs.

4. Knowledge of family life education, including knowledge of ways in which parents can be actively included in a school's program, and participation with parents' groups.

5. Knowledge of child-family-school-community relationships, including familiarity with various community agencies, and knowledge of how to work with other professional persons in an interdisciplinary, comprehensive educational team.

6. Knowledge of the piece of the prekindergarten-kindergarten in the total educational program, including awareness of the relatedness of these programs to the total school or agency organization, and knowledge of the importance of and ways to facilitate coordination with other levels of education, in order to provide continuity in the educational experience for children.

7. Laboratory experiences, including:
    A) observation and participation with children ages three to twelve; and,
    B) student teaching experience at prekindergarten-kindergarten levels under qualified supervision.

8. Related and supplementary courses, including:
    A) Psychology - child (Exceptional, abnormal, mental hygiene)**
    B) Child Health and Nutrition (physiology)**
    C) Cultural Anthropology
    D) Sociology (community structure, resources, environment influences)**
    **Parenthesis indicate suggested coursework

From: Department of Public Instruction Teacher Education and Certification Division, Des Moines, Iowa 50319 #5100-C100351-5/78.

TRANSPORTING PRESCHOOL HANDICAPPED CHILDREN

Sometimes the question comes up "How can we safely transport a preschool handicapped child?" When this does happen the following ideas are recommended:

1. Check with the parents to see how they transport the child.
2. Seek recommendations from a physical therapist or occupational therapist regarding positioning, handling, seat belts, etc.
3. Fire Retardant Safety Vests can be obtained from:
   Frommelt Industries, Inc., 365 Huff St., Dubuque, IA 52001
   Contact Person: Mr. Dick Frommelt 319-589-2736
   Cost: $20.00 per vest.
4. It is often helpful if the bus driver has a card or notebook on each child. This might include: a) picture of the child, b) name, address, parents name, phone number, c) seating arrangement - where child sits on bus, d) directions for how the child sits on seat, etc. e) medication, emergency phone number, f) directions of where the child lives, (Idea from Mr. Justice, Transportation Dept., Western Delaware Community School District, Manchester), g) other pertinent information.

*FOR EPILEPTIC SEIZURES

A major epileptic seizure is often dramatic and frightening but usually lasts only a few minutes. It does not require expert care. These simple procedures should be followed:

1. KEEP CALM. You cannot stop a seizure once it has started. Let the seizure run its course. Do not try to revive the person.
2. Ease the person to the floor and loosen his clothing.
3. Try to prevent him from striking his head or body against any hard, sharp or hot objects but do not interfere otherwise with his movement.
4. Turn his face to the side so that saliva can flow out of his mouth.
5. DO NOT INSERT ANYTHING BETWEEN THE PERSON'S TEETH.
6. Do not be frightened if the person having the seizure seems to stop breathing momentarily.
7. After the movements stop and the person is relaxed, he should be allowed to sleep or rest if he wishes.
8. It isn't generally necessary to call a doctor unless the attack is followed almost immediately by another seizure, or if the seizure lasts more than about ten minutes.
9. If the person is a child, the parents or guardians should be notified that a seizure has occurred.
10. After a seizure, many people can carry on as before. If after resting a while the person seems groggy, confused or weak, it may be better to accompany him home.

Courtesy of:
IOWA CHAPTER
EPILEPSY FOUNDATION OF AMERICA
and
EPILEPSY ASSOCIATION OF AREA X
Box 1011
Cedar Rapids, IA 52406

*It is recommended that you work closely with the school nurse.

CONCLUDING THOUGHT

It is sincerely hoped that this resource guide is useful to you. As you continue to grow and learn, do not forget the challenge issued to all educators, be they parents, teachers, therapists, etc.

John Amos Comenius, (1582-1670) sometimes called the "grandfather of education, wrote in his book The Great Didactic:

> "Nor is it any obstacle that some seem to be . . . dull for this renders more imperative the universal culture (education) of such intellects. The slower and the weaker disposition of any man, the more he needs assistance . . . Nor can any man be found whose intellect is so weak it can not be improved by culture (education)."

Reference: Keatinge, M.W. The Great Didactic of John Amos Comenius. London: Adam and Black, 1896. p. 219.